

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 08, 2002 8:00 am**  
**Secretary of State**

04-08-2002 90248 033 \*\*\*150.00

0375311 AV

**DOCUMENT # P00000106028**

1. Entity Name

**CHEEBURGER DEVELOPMENT COMPANY, INC.**

Principal Place of Business

**C/O COMPUKEEPER INC.  
 290 S SILVER PALM ROAD  
 BOCA RATON FL 33432**

Mailing Address

**C/O COMPUKEEPER INC.  
 1446 NW 2ND AVE STE 105  
 BOCA RATON FL 33432**



2. Principal Place of Business

**217 Thatch Palm Dr**

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

**Boca Raton, FL**

City & State

4. FEI Number

**65-1053049**

Applied For

Not Applicable

Zip

**33432**

Country

**USA**

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**DARROW, PAUL**

**C/O COMPUKEEPER INC.  
 290 S SILVER PALM ROAD  
 BOCA RATON FL 33432**

7. Name and Address of New Registered Agent

Name  
**Paul Darrow**

Street Address (P.O. Box Number is Not Acceptable)  
**217 Thatch Palm Dr**

City  
**Boca Raton**

**FL**

Zip Code  
**33432**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

**X**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐  
 (See criteria on back)

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2002 Fee will be \$550.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete  
 NAME **DARROW, PAUL**  
 STREET ADDRESS **290 SOUTH SILVER PALM ROAD**  
 CITY-ST-ZIP **BOCA RATON FL 33432**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
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TITLE ☐ Delete  
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 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Change ☐ Addition  
 NAME **Paul Darrow**  
 STREET ADDRESS **217 Thatch Palm Drive**  
 CITY-ST-ZIP **Boca Raton, FL 33432**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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 STREET ADDRESS  
 CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE: Paul Darrow, Pres**

**1/19/02**

**954-448-0145**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)