

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 16, 2002 8:00 am
Secretary of State

07-16-2002 90353 004 ***150.00

DOCUMENT # P01000040585

1. Entity Name
CATANIA RESTAURANT CONSULTANTS, INC.



Principal Place of Business
821 COLLINS AVENUE
SUITE 201
MIAMI BEACH FL 33139

Mailing Address
821 COLLINS AVENUE
SUITE 201
MIAMI BEACH FL 33139



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65109853 ✓

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *James J. [Signature]*

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

(NOTE: Registered Agent signature required when reinstating)

DATE **7/10/02**

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CATANIA, SALVATORE 821 COLLINS AVENUE SUITE 201 MIAMI BEACH FL 33139	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD CATANIA, CAMELY 821 COLLINS AVENUE SUITE 201 MIAMI BEACH FL 33139	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Cameley [Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE **7/10/02**

DAYTIME PHONE #

CR2E034 (4/02)

1-561-488-2442 TEL
1-800-846-5622 TOLL FREE
1-561-488-7146 FAX

Morton Amster
ACCOUNTANT - AUDITOR

Attachment
Document #

PO 10000
40585

8128 CORMYOR WAY
BOYNTON BEACH, FLORIDA
33437

120647

July 10, 2002

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL. 32302-1500

RE: Catania Restaurant Consultants, Inc.

Gentlemen or Ladies;

I am the accountant for the above named corporation. My client received a form asking for \$550.00 for the year end Corporation Business Report. My client never received the original report. I called Tallahassee and informed them of such, and they said I should send \$150.00 and a letter explaining the problem, which I am now doing.

Please accept this payment for \$150.00 as the full payment of the 2002 Business Report.

Thanking you for your kind consideration in this matter.

Sincerely,


Morton Amster