FILED

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Jun 11, 2002 8:00 am Secretary of State DOCUMENT # P01000041438 05-15-2002 90048 032 \*\*\*150.00 1. Entity Name MAMBO'S OF BONITA, INC. 92488 Principal Place of Business Mailing Address 8051 ESTERO RIVO 6051 ESTERO BLVD FT MYERS BEACH FL 33931 FT MYERS BEACH FL 33931 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Clty & State 4. FEI Number Applied For APPLIED FOR Zip \$8.75 Additional 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent David F. Garber, Esq. BRANDAUER, STEPHAN Street Address (P.O. Box Number is Not Acceptable) 745 12th Avenue South, **6051 ESTERO BLVD** FT MYERS BEACH FL 33931 Suite B Zip Code Napl<u>es</u> 34102 8. The above named entity submit this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. David F. Garber, Esq. of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. (9/01) MILE TITLE ☐ Delete Brandauer, Stephan BRANDAUER, STEPHAN NAME NAME STREET ADDRESS 8014 Buccaneer Dr. 6051 ESTERO BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT MYERS BEACH FL 33931 Ft. Myers Beach, FL 33931 TITLE ☐ Defete TITLE Change **X**Addition NAME Brandauer, Tibor STREET ADDRESS STREET ADDRESS 8014 Buccaneer Dr. CITY-ST-7/P CITY-ST-ZIP <u>Ft. Mvers Beach, FL 33931</u> TITLE -- -Delete-TITLE-Gutierrez, Leobardo NAME NAME STREET ADDRESS STREET ADDRESS 584 105th Avenue CITY-ST-ZIP CITY-ST-ZIP Naples, Florida 34108 D/S/T TITLE ☐ Detete TITLE ☐ Change ■ Addition Ricardo, Reinaldo NAME NAME STREET ADDRESS STREET ADDRESS 1030 39th Street SW CITY-ST-ZIP CITY-ST-ZIP Naples, FL 34117 ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADORESS STREET ACDRESS CITY-ST-7IP CITY-ST-7IP TITLE me 🔲 Delete Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 it changed, or on an attachment without page and the properties of the corporation or an attachment without page and the properties of the corporation of the corporat

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