

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 18, 2002 8:00 am
Secretary of State

02-18-2002 90143 012 ***150.00

DOCUMENT # P01000068812

1. Entity Name
LIBERTY DINER, INC.

Principal Place of Business
1401 E. BROWARD BLVD., STE. 300
FT. LAUDERDALE FL 33301

Mailing Address
1401 E. BROWARD BLVD., STE. 300
FT. LAUDERDALE FL 33301



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
5660 W. SAMPLE RD
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
Margate FL

City & State

4. FEI Number
65-1119626

Applied For
 Not Applicable

Zip
33073

Country

Zip

33073

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

DYAL, J. PATRICK
1401 E. BROWARD BLVD., STE. 300
FT. LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

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.

SIGNATURE

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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DP
MARCIANTE, LOUIS
5660 W. SAMPLE RD.
MARGATE FL 33073-3455 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DVS
GOLDSTEIN, FREDERICK S
2226 CYPRESS BEND DR., N.
POMPANO BEACH FL 33069 ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
Vice President, Secretary
Joseph R. Marcianite
9720 Eucharistic Pointe Lane
Box A Eden FL 33494 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

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 CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ 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:

Joseph R. Marcianite
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 29/02
 Date

954 956-7111
 Daytime Phone #

CR2E034 (9/01)