

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 am
Secretary of State
 04-29-2002 90157 036 ***150.00

DOCUMENT # P01000068966

1. Entity Name
THE MAMBO CHEF, INC.

Principal Place of Business

16363 FERN DRIVE
WESTON FL 33326

Mailing Address

16363 FERN DRIVE
WESTON FL 33326

2. Principal Place of Business

1933 University Dr.

3. Mailing Address

9915 NW 66th Manor

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Coral Springs

City & State

Parkland FL

4. FEI Number

65 1120532

Applied For

Not Applicable

Zip

33071

Country

Broward

Zip

33076

Country

Broward

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

QUESADA, JORGE E
16363 FERN DRIVE
WESTON FL 33326

New address →

City

Parkland

FL

Zip Code

33076

7. Name and Address of New Registered Agent

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 **D** ☐ Delete
NAME **QUESADA, JORGE E**
STREET ADDRESS **16363 FERN DRIVE**
CITY-ST-ZIP **WESTON FL 33326**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

JORGE E. QUESADA

4/15/02 (954) 575-0533

CR2E034 (9/01)