

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)


FILED
May 13, 2003 8:00 am
Secretary of State

05-13-2003 90049 029 ***150.00

DOCUMENT # P01000070232

1. Entity Name TOBY'S, CORP

NO 11-19-02



2. Principal Place of Business 11201 SW 55 St. Lote H 12
Miramar, FL 33025

Mailing Address 11201 SW 55 St. Lote H 12
Miramar, FL 33025

3. Mailing Address 8758 SW 8th Street

Suite, Apt. #, etc.

City & State Miami, FL

Zip 33174 **Country** USA



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-1132556 **Applied For** Not Applicable

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

6. Name and Address of Current Registered Agent

LEONIDES M. CICILIO
11201 SW 55 St. Lote H 12
Miramar, FL 33025

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. I am familiar with, and accept responsibility for, the registered agent.

FILE-NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
PD <input type="checkbox"/> Delete NAME LEONIDES M. CICILIO STREET ADDRESS 11201 SW 55 St Lote H 12 CITY-ST-ZIP Miramar, FL 33025	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
VD <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Leonides M. Cicilio*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/5/03

Attachment

90133571

May 6, 2003

Florida Department of State
Division of Corporations
Corporate Filings
P. O. Box 6327
Tallahassee, FL 32314

Ref.: Document #P01000070232
FEI Number: ~~65-1132556~~
TOBY'S CORP

Gentlemen:

Enclosed please find a money order in the amount of \$150.00 to cover filing fees for 2003. Please note my accountant submitted the form to me and was returned for insufficient address (return envelope enclosed). By the time I received it, signed it and made money order, it is now May 6.

Please accept my apology for the delay. Thanking you in advance for your cooperation, I remain,

Sincerely yours,


Leonides M. Cicilio

President

TOBY'S CORP.

1201 SW 55 Street, Box 300
Miramar, FL 33025