

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 14, 2003 8:00 am**  
**Secretary of State**

04-14-2003 90758 026 \*\*\*150.00

03/30/99 AV

**DOCUMENT # P01000072008**

1. Entity Name  
**EURO BREAD & CAFE' OF DELRAY, INC.**



Principal Place of Business  
**2400 E COMMERICAL BLVD STE 826  
FT LAUDERDALE FL 33308**

Mailing Address  
**7800 W. OAKLAND PARK BLVD.  
BUILDING "C"  
SUNRISE FL 33351**

**60017473**



2. Principal Place of Business

3. Mailing Address

**6847 Stirling Rd.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**DAVIE - FL**

4. FEI Number

**04-3587435**

Applied For

Not Applicable

Zip

Country

Zip

Country

**33314**

**USA**

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

**HOTTE, JOHN F  
2400 E COMMERICAL BLVD STE 826  
FT LAUDERDALE FL 33308**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**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  
Trust Fund Contribution.

**\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
PEREZ, GERARD  
834 NW 111TH AVE.  
PLANTATION FL 33324**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
PEREZ, GERARD  
5985 Buena Vista Court  
Boca Raton - FL 33433**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VP  
SALVAT, GUY  
890 NW 123RD  
CORAL SPRINGS FL 33071**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VP  
Guy SALVAT  
13214 SW 21st.  
MIAMI - FL 33186**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**S  
CABANETTES, CHRISTIAN  
852 NW 111TH AVE.  
PLANTATION FL 33324**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**S  
CABANETTES, CHRISTIAN  
8999 S.W. 52nd St.  
COOPER CITY - FL 33328**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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:**

**SIGNATURE REQUIRED**  
**CABANETTES, CHRISTIAN**

**04-11-03**

**(954) 587-3876**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E034 (10/02)