

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 24, 2002 8:00 am
Secretary of State

06-24-2002 90297 018 ***158.75

DOCUMENT # P01000073454

1. Entity Name

E Private Gourmet Caterer Inc.

DO NOT WRITE IN THIS SPACE

969333

2. Principal Place of Business

1126 S. Federal Hwy

Suite, Apt. #, etc.

Suite # 131

City & State

Ft. Lauderdale, FL

Zip

33316

Country

3. Mailing Address

15 SE 10th Street

Suite, Apt. #, etc.

Apt # 1

City & State

Ft. Lauderdale, FL

Zip

33316

Country

4. FEI Number

01-0686872

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

EMIL ESMUNDO

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

15 S.E. 10th Street Apt # 1

City

Ft. Lauderdale

FL

Zip Code

33316

**DO NOT WRITE
IN THIS SPACE**

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)

☒

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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	<i>President / Vice President</i>
NAME	<i>EMIL ESMUNDO</i>
STREET ADDRESS	<i>15 S.E. 10th Street Apt # 1</i>
CITY-ST-ZIP	<i>Ft. Lauderdale, FL 33316</i>
TITLE	<i>Secretary / Treasurer</i>
NAME	<i>Maria BURNS</i>
STREET ADDRESS	<i>312 SW 4th Ct.</i>
CITY-ST-ZIP	<i>Ft. Lauderdale, FL 33315</i>
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Emil Esmundo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/17/02

Date

(954) 461-7228

Daytime Phone #

**EMIL ESMUNDO
PRESIDENT / Vice President**

CR2E034B (12/01)

E

E Private Gourmet

Caterer Inc.

15 S.E. 10th Street

Apt# 1

Ft. Lauderdale, FL. 33316

attachment

PO1000073454

969333

June 16, 2002

Uniform Business Report

Division of Corporations

P.O. Box 1500

Tallahassee, FL 32302-1500

Dear Sir or Madam:

Just shortly after my incorporation I relocated, some valuable information was misplaced in the process and a great deal of forwarded mail never reached me. Unfortunately, I was not able to complete and return the Uniform Business Report within the deadline. Please accept my apologies for this tardiness. Please find above my new mailing address and my new business address please consider this an official change of addresses. Along with the renewal I am requesting an updated certificate of status, I have enclosed a check with this amount included. Thank-You in advance for your time and patience.

Sincerely,



Emil Esmundo

President/Chef

Business Location

1126 South Federal Hwy.
Suite# 131

Ft. Lauderdale, FL 33316