2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000083222

FILED

03 APR 23 AM 8:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

000047 AV

1. Entity Name

PHILIPPINE'S DELIGHT, INC
NAME CHANGED TO PHILIPPINE'S DELIGHT, INC

Principal Place of Business	Mailing Address
8031 SW 197 TERRACE MIAMI FL 33189	8031 SW 197 TERRACE MIAMI FL 33189

XXIX CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
8930 SW 181st TERRACE	8930 SW 181st TERRACE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MIAMI, FL 33157	City & State: MIAMI, FL 33157
Zip / Country	Zip / Country

4. FEI Number 65-1138104 ☐ Applied For ☐ Not Applicable

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
PAULE, MARIBEL S 8031 SW 197 TERRACE MIAMI FL 33189	Name: PAULE, MARIBEL S. Street Address (P.O. Box Number is Not Acceptable): 8930 SW 181st TERRACE MIAMI, FL 33157 City: MIAMI FL Zip Code: 33157

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: Maribel S. Paule MARIBEL S.PAULE, PRESIDENT 03/31/2003
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	D PAULE, MARIBEL S 8031 SW 197 TERRACE MIAMI FL 33189 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR PAULE, MARIBEL S. 8930 SW 181st TERRACE MIAMI, FL 33157 XX Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR PAULE, MANUEL 8930 SW 181st TERRACE MIAMI, FL 33157 ☐ Change XX Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	100017112651 04/28/03--01005--010 **150.00 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (10/02)

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: Maribel S. Paule MARIBEL S. PAULE, PRESIDENT 3/31/03 (305) 259-6868
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #