FILED

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Jul 15, 2002 8:00 am Secretary of State **DOCUMENT #** P01000106339 1. Entity Name 07-15-2002 90188 019 \*\*\*150.00 DINER EXPRESS, INC. Principal Place of Business Mailing Address 1303 CASA AVE. 1303 CASA AVE. BATMOOAT STUART FL 34994 STUART FL 34994 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FRISKEY, CECEIL H Street Address (P.O. Box Number is Not Acceptable) 1303 CASA AVE. STUART FL 34994 City 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 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After September 13, 2002 Fee will be \$750.00 (See criteria on back) Trust Fund Contribution. Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition NAME FRISKEY, CECEIL H NAME STREET ADDRESS 1303 CASA AVE. STREET ADDRESS CITY-ST-ZIP STUART FL 34994 CITY-ST-ZIP TITLE **VD** ☐ Delete TITLE ☐ Change ☐ Addition NAME FRISKEY, JOHN NAME STREÈT ADDRESS 1303 CASA AVE. STREET ADDRESS CITY-ST-ZIP STUART FL 34994 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 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

SIGNATURE:



#Po 600 106339

July 8,2002

To: Division of Corporations

**Uniform Business Report Filings** 

P.O. Box 1500

Tallahassee, Fl 32302

Re:

Document # P01000106339

Dear Sir,

We incorporated Diner Express a few months before the \$150.00 fee was due, and consequently we received no notice. I called regarding the above document and Matt, at customer service, stated I should write this letter to inform you of the above information and ask that the penalties be waived. I would appreciate your consideration in this matter: Please find enclosed a check for the amount of \$150.00.

Please call if there are any concerns in this matter. Thank you.

Sincerely,

Ceceil H. Friskey John Friskey