

**02103**  
**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

FILED

03 FEB 17 AM 11:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

500011181945  
01/29/03--01057--001 \*\*308.75

DOCUMENT # P01000108769

1. Entity Name  
**BACK A YARD CARIBBEAN TAKE OUT  
RESTAURANT AND GROCERY INC.**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**BACK-A-YARD**

3. Mailing Address

**3582 W. BROWARD BLVD.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**3582 W. BROWARD BLVD.**

City & State

City & State

**FT. LAUDERDALE, FL**

Zip

Country

Zip

Country

**33311**

**USA**

DO NOT WRITE IN THIS SPACE

4. FEI Number

**651152671**

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

**ADRIAN H. SNAGLE**

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

**251 SO STAGE ROAD #**

City

**PLANTATION**

FL

**33317**

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)

**1/13/03**

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  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**OPAL CROSS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**ROBERT ELLIOT**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**CLAUDE CHITO**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**OPAL CROSS**  
**PRESIDENT**  
**53 SPINNING WHEEL JANE**  
**TALLAHASSEE, FL 33319**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**ROBERT ELLIOT**  
**SECRETARY**  
**3582 W. BROWARD BLVD.**  
**FT. LAUD. FL. 33311**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**CLAUDE CHITO**  
**VICE PRESIDENT**  
**53 SPINNING WHEEL JANE**  
**TALLAHASSEE, FL 33319**

TITLE  
NAME  
STREET ADDRESS  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**OPAL CROSS**

Date

**12/23/02**

Daytime Phone #

**(954) 583-8100**

CR2E034B (12/01)

Back-A-Yard  
3582 W. Broward Blvd.  
Ft. Lauderdale, FL, 33311

December 23, 2002

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

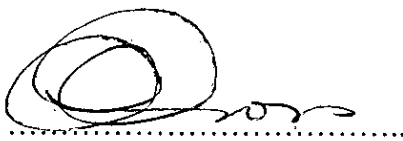
Dear Sir/Madam,

With regards to your certificate of dissolution of Back-A-Yard take Out Restaurant and Grocery Inc., please be informed that we were not aware of an annual corporation renewal fee nor did we receive a renewal notice in 2002.

We would appreciate you waiving the reinstatement fee as a courtesy since we did not receive a notice.

Attached is our Uniform Business Report and filing fee. *for 2002 & 2003*

Thank you for understanding.



Opal Cross