

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01350

1. Entity Name

MOXIE'S, INC.

FILED

May 19, 2000 8:00 am
Secretary of State

05-19-2000 90044 049 ***150.00

Principal Place of Business

Mailing Address

% PILLSBURY
200 S. 6TH STREET
MINNEAPOLIS MN 55402

% PILLSBURY
200 S. 6TH STREET
MINNEAPOLIS MN 55402-1403

AGEO Inc.
SOUTH SIXTH STREET
S 08X3
MINNEAPOLIS, MN 55402-1464

DIAGEO Inc.
200 SOUTH SIXTH STREET
M/S 08X3
MINNEAPOLIS, MN 55402-1464



DO NOT WRITE IN THIS SPACE

FEI Number 72-0994099

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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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.

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) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO
MALAMATINAS, DENNIS
17777 OLD CUTLER RD.
MIAMI FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
Dennis Malamatinas
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
CLAYTON, PAUL
17777 OLD CUTLER RD.
MIAMI FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVS
Enrique Silva
17777 Old Cutler RD
Miami, FL 33157 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS
POPPEL, DONALD R
200 SOUTH SIXTH STREET
MINNEAPOLIS MN ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CFOD
HEGGIE, COLIN
17777 OLD CUTLER ROAD
MIAMI FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVT
Colin Heggie
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VAS
W. Barry Blum
17777 Old Cutler RD
Miami, FL 33157 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VAS
Philip Kinnersly
17777 Old Cutler RD
Miami, FL 33157 ☐ Change ☒ Addition

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donald R. Poppele 425-100 (612) 330-7094
Date Daytime Phone #

CR2E034 (9/99)