

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000013582

FILED
Mar 08, 2003
Secretary of State

Entity Name: UNIVERSITY DELI & CAFE, INC.

Current Principal Place of Business:

4755 SANTA DEL RAE AVE
FT MYERS, FL 339018827

New Principal Place of Business:

12800 UNIVERSITY DRIVE
SUITE 105
FT MYERS, FL 33907

Current Mailing Address:

4755 SANTA DEL RAE AVE
FT MYERS, FL 339018827

New Mailing Address:

12800 UNIVERSITY DRIVE
SUITE 105
FT MYERS, FL 33907

FEI Number: 02-0549862

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOTO, LUIS
4755 SANTA DEL RAE AVE
FT MYERS, FL 339018827

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: SOTO, LUIS
Address: 4755 SANTA DEL RAE AVE
City-St-Zip: FT MYERS, FL 339018827

Title: VSD () Delete
Name: SOTO, PATRICIA
Address: 4755 SANTA DEL RAE AVE
City-St-Zip: FT MYERS, FL 339018827

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: SOTO, LUIS P
Address: 4755 SANTA DEL RAE AVE
City-St-Zip: FT MYERS, FL 339018827

Title: VSD (X) Change () Addition
Name: SOTO, PATRICIA VP
Address: 4755 SANTA DEL RAE AVE
City-St-Zip: FT MYERS, FL 339018827

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUIS SOTO

P

03/08/2003

Electronic Signature of Signing Officer or Director

Date