

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

FILED
Apr 15, 2003 8:00 am
Secretary of State

04-15-2003 90111 025 ***150.00

DOCUMENT # P02000084639

1. Entity Name

WORLDWIDE FOOD SERVICE, INC.



00001194

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
6455 NE 3 Avenue

3. Mailing Address
6455 NE 3 Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Miami, FL 33138

City & State
Miami, FL 33138

4. FEI Number
82-0557169

Applied For
Not Applicable

Zip
33138

Country
U.S.A.

Zip
33138

Country
U.S.A.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Ernesto M. Alzugaray

Street Address (P.O. Box Number is Not Acceptable)
6455 NE 3 Avenue

City
Miami, FL Zip Code
33138

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

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25.
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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Alzugaray, Ernesto M.
6455 NE 3 Avenue
Miami, FL 33138

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Alzugaray, Ernesto B.
6455 NE 3 Avenue
Miami, FL 33138

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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 on an attachment with an address, with all other duly empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Ernesto M. Alzugaray, Director

4/10/03 (305) 525-6794
Date Daytime Phone #

CR2E034B (12/02)