

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

3/3

FILED
Apr 14, 2003 8:00 am
Secretary of State

03-31-2003 90312 008 ***150.00

DOCUMENT # P02000113477

1. Entity Name

POWER SMOOTHIE CAFE FRANCHISING, INC.



Principal Place of Business

1844 NORTH NOB HILL ROAD STE 460
PLANTATION FL 33322

Mailing Address

1844 NORTH NOB HILL ROAD STE 460
PLANTATION FL 33322

2. Principal Place of Business

5499 N. Federal Hwy

Suite, Apt. #, etc.

Suite B

City & State

Boca Raton, FL

Zip

33487

Country

USA

3. Mailing Address

5499 N. Federal Hwy

Suite, Apt. #, etc.

Suite B

City & State

Boca Raton, FL

Zip

33487

Country

USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

45-0501547

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GATSOS, ELAINE M ESQ

1499 WEST PALMETTO PARK ROAD STE 210

BOCA RATON FL 33486

7. Name and Address of New Registered Agent

Name - James Traina

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

5499 N. Federal Hwy.

Suite B

City

Boca Raton

FL

Zip Code

33487

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

James Traina James Traina v/t/s

2/11/03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

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 D
NAME CULLEN, WILLIAM J
STREET ADDRESS 1844 NORTH NOB HILL ROAD STE 460
CITY-ST-ZIP PLANTATION FL 33322 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME William J. Cullen ☒ Change ☐ Addition
STREET ADDRESS 5499 N. Federal Hwy Suite B
CITY-ST-ZIP Boca Raton, FL 33487

TITLE v/t/s
NAME James Traina ☐ Change ☒ Addition
STREET ADDRESS 5499 N. Federal Hwy Suite B
CITY-ST-ZIP Boca Raton, FL 33487

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

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

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

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

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

WILLIAM J. CULLEN William J. Cullen 2/11/03 561-4167000

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)