

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 01, 2001 8:00 am
Secretary of State

08-01-2001 90203 001 ***600.00

DOCUMENT # P93000064653

1. Entity Name
FLORIDINO'S INTERNATIONAL, INC.

Principal Place of Business
3560 CYPRESS GARDENS ROAD
WINTER HAVEN FL 33884

Mailing Address
3560 CYPRESS GARDENS ROAD
WINTER HAVEN FL 33884

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3210092**

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

FLORIDINO, MICHAEL
3560 CYPRESS GARDENS RD.
WINTER HAVEN FL 33884

Name **Michael Floridino**
 Street Address (P.O. Box Number is Not Acceptable)
703 S LAKE FLORENCE DR.
 City **Winter Haven** **FL** Zip Code **33884**

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 **Michael Floridino**
 Signature, typed or printed name of registered agent and title if applicable

[Signature]
 (NOTE: Registered Agent signature required when reinstating)

7/23/01
 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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 **D FLORIDINO, MIKE** ☐ Delete
 STREET ADDRESS **3560 CYPRESS GARDENS RD.**
 CITY-ST-ZIP **WINTER HAVEN FL 33884**

TITLE
 NAME **Michael Floridino** ☒ Change ☐ Addition
 STREET ADDRESS **703 S. LAKE FLORENCE DR.**
 CITY-ST-ZIP **WINTER HAVEN, FL 33884**

TITLE
 NAME **D PIRGOUSIS, NICK** ☒ Delete
 STREET ADDRESS **3560 CYPRESS GARDENS RD**
 CITY-ST-ZIP **WINTER HAVEN FL 33884**

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

TITLE
 NAME **D DOLNEY, FRANK** ☒ Delete
 STREET ADDRESS **3560 CYPRESS GARDENS RD**
 CITY-ST-ZIP **WINTER HAVEN FL 33884**

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

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ 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: **Michael Floridino** **7/23/01** **(863) 326-5682**
 SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR Date Daytime Phone #

CR2E034 (5/01)