## **2001 UNIFORM BUSINESS REPORT (UBR)** DOCUMENT # P9500076431

1. Entity Name

STELLA MARIA'S, INC.

Principal Place of Business 2430 E. COMMERCIAL BLVD. FORT LAUDERDALE FL 33308

Mailing Address

2430 E. COMMERCIAL BLVD. FORT LAUDERDALE FL 33308 FILED Aug 07, 2001 8:00 am Secretary of State 08-07-2001 90009 007 \*\*\*550.00

							1 13811381 118		74944 Hankan	<u>.</u>	<b>   </b>	161 S161 1981
2. Principal Place of Business			3. Mailing Address			1						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			1		DO NOT	WRITE IN	THIS S	PACE	
City & State			City & State			4. 1	El Number	65-061	9272			oplied For ot Applicable
Zip		Country	Zip محمد المحمد ا	Country		5. (	Certificate of	Status Desi	red [	] <b>\$</b>	8.75 Add	ditional
	6. Name	and Address of Current R		7. Name and Address of New Registered Agent								
2430		ABETH RCIAL BLVD. ALE FL 33308		· ·	Name Street Address (	(P.O. B	lox Number i	s Not Acce	otable)			
!			,		City					FL Zip Code		
SIGNATURE _	Signature, typed	or printed name of registered agent an	the purpose of changing its		ed office or register			in the State		DATE		
Tax filing re		ble to satisfy its Intangible and elects to do so.	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of Stat			te	1	on Campaig Fund Contri		g 		<b>0</b> May Be to Fees
11.		OFFICERS AND D	IRECTORS	12.		AD	DITIONS/CH	ANGES TO	OFFICERS	AND [	DIRECTORS	3 IN 11
NAME STREET ADDRESS CITY-ST-ZIP	2430 E CO FORT LAU	, ELIZABETH DMMERCIAL BLVD DERDALE FL	☐ Delete		ľ	_					☐ Change	Addition
NAME STREET ADDRESS	STVP PETKO, ST 2430 E. CO FT. LAUDE	OMMERICAL BLVD	□ Delete		ı				ı	ļ	Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	1		· · · · <u>·</u> · · ·	<del>- 1 40 T                                 </del>	<u> </u>	· <del>-</del> · ·	[	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	- 1						[	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		T ADDRESS ST-ZIP					[	Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	ertify that the	information supplied with the	☐ Delete	CITY-	T ADDRESS ST-ZIP		10.07/07/2				Change	Addition

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: