

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000079202

1. Entity Name

MANCINI ENTERPRISES, INC.

FILED

Feb 04, 2000 8:00 am  
Secretary of State

02-04-2000 90053 029 \*\*\*158.75

Principal Place of Business

Mailing Address

855 SW 173RD AVE.  
PEMBROKE PINES FL 33029

855 SW 173RD AVE.  
PEMBROKE PINES FL 33029-4218

2. Principal Place of Business

1940-1 No. Commerce Parkway  
Suite, Apt. #, etc.

3. Mailing Address

1940-1 No. Commerce Parkway  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Weston, Florida

City & State

Weston, Florida

4. FEI Number

65-0612048

Applied For

Not Applicable

Zip

33326

Country

USA

Zip

33326

Country

USA

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MANCINI, ALDO MR  
855 SW 173RD AVE.  
PEMBROKE PINES FL 33029

7. Name and Address of New Registered Agent

Name

Aldo M. Mancini

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

1940-1 North Commerce Parkway

City

Weston

FL

Zip Code

33326

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

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

(NOTE: Registered Agent signature required when reinstating)

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 \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**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

TITLE P  
NAME MANCINI, ALDO  
STREET ADDRESS 855 SW 173RD AVE.  
CITY-ST-ZIP PEMBROKE PINES FL 33029 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition  
NAME Aldo M. Mancini  
STREET ADDRESS 1940-1 No. Commerce Parkway  
CITY-ST-ZIP Weston, Florida 33326

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #