

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 28, 2000 8:00 am
Secretary of State
 01-28-2000 90142 046 ***150.00

DOCUMENT # P96000004195

1. Entity Name

CUSTOM CHOICE HOT DOG CARTS CORP.

Principal Place of Business

450 ANSIN BLVD.
 WAREHOUSE 1725
 HALLANDALE FL 33009
 US

Mailing Address

21030 N.E. 24 CT.
 NORTH MIAMI BEACH FL 33180-1022
 US

2. Principal Place of Business

3605 Pembroke Rd

3. Mailing Address

3605 Pembroke Rd

Suite, Apt. #, etc.

C-5

Suite, Apt. #, etc.

C-5

City & State

Hollywood, FL

City & State

Hollywood, FL

Zip

33021

Country

USA

Zip

33021

Country

USA

4. FEI Number

65-0636071

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

RIOS, ROBERTO C
 21030 N.E. 24 CT.
 NORTH MIAMI BEACH FL 33180

Name

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

City

FL

Zip Code

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
 NAME RIOS, ROBERTO C
 STREET ADDRESS 21030 NE 24TH CT
 CITY-ST-ZIP NORTH MIAMI BEACH FL 33180

TITLE ☒ Change ☐ Addition
 NAME 3625 Pembroke Rd. C-5
 STREET ADDRESS Hollywood, FL
 CITY-ST-ZIP 33021

TITLE VD ☐ Delete
 NAME RIOS, CLAUDIA A
 STREET ADDRESS 21030 NE 24TH CT
 CITY-ST-ZIP NORTH MIAMI BEACH FL 33180

TITLE ☒ Change ☐ Addition
 NAME 3625 Pembroke Rd. C-5
 STREET ADDRESS Hollywood, FL
 CITY-ST-ZIP 33021

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
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 CITY-ST-ZIP

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

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 REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/24/00 (954) 983-4424

CR2E034 (9/99)