

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000062932

FILED  
Jan 13, 2003  
Secretary of State

Entity Name: SFORZA ENTERPRISES, INC.

## Current Principal Place of Business:

%SEI RESTAURANT GROUP  
1730 SOUTH FEDERAL HIGHWAY, STE. 340  
DELRAY BEACH, FL 33483 US

## New Principal Place of Business:

## Current Mailing Address:

%SEI RESTAURANT GROUP  
1730 SOUTH FEDERAL HIGHWAY, STE. 340  
DELRAY BEACH, FL 33483 US

## New Mailing Address:

FEI Number: 65-0705377

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VISIONE, ANTHONY  
1730 SOUTH FEDERAL HIGHWAY, STE. 340  
DELRAY BEACH, FL 33483 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: HOLLAND, VINCENT  
Address: 120 SOUTH OLIVE AVE., #501  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: P ( ) Delete  
Name: VISIONE, ANTHONY  
Address: 120 SOUTH OLIVE AVE., #501  
City-St-Zip: WEST PALM BEACH, FL 33401

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: HOLLAND, VINCENT  
Address: 1730 S FEDERAL 340  
City-St-Zip: DELRAY BEACH, FL 33483

Title: P (X) Change ( ) Addition  
Name: VISIONE, ANTHONY  
Address: 1730 S FEDERAL HWY 340  
City-St-Zip: DELRAY BEACH, FL 33483

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TONY VISIONE

MR

01/13/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date