

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 14, 2007 8:00 am
Secretary of State

05-14-2007 90089 041 ***150.00

DOCUMENT # P96000083957

1. Entity Name

RUTH DAVID OF DEERFIELD, INC.



Principal Place of Business

100 SOUTH MILITARY TRAIL
DEERFIELD BEACH FL 33443
US

Mailing Address

915 W 18TH ST
HIALEAH FL 33010
US



2. Principal Place of Business - No P.O. Box #

3191 N FED HWY

Suite, Apt. #, etc.

3. Mailing Address

15800 W PRESTWICK PL

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

BOCA RATON FL

City & State

MIAMI LKS FL 33

4. FEI Number

65-0738715

Applied For

Not Applicable

Zip

33431

Country

USA

Zip

33014

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BONILLA, PAUL JR
15800 W PRSTWICK PL
MIAMI LAKES FL 33014

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Maria A Bonilla

NOTE NEW ADDRESS

4-24-07

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME BONILLA, PAUL JR
STREET ADDRESS 15800 WEST PRESTWICK PLACE
CITY- ST- ZIP MIAMI LAKES FL 33014

TITLE D ☐ Delete
NAME BONILLA, MARIA A
STREET ADDRESS 15800 WEST PRESTWICK PLACE
CITY- ST- ZIP MIAMI LAKES FL 33014

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Maria A Bonilla Maria Bonilla ST

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-07

Date

305-884-8555

Daytime Phone #