## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE AND TYPED OF

## FILED DOCUMENT # **P97000049416** Apr 22, 2000 8:00 am Secretary of State SU HAM RESTAURANT, INC. 04-22-2000 90110 021 \*\*\*150.00 Principal Place of Business Mailing Address 7451 NW 57TH ST 7451 NW 57TH ST TAMARAC FL 33319-2101 TAMARAC FL 33319 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0759612 Not Applicable Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SU HAM, TULIO Street Address (P.O. Box Number is Not Acceptable) 10700 NW 18 COURT PLANTATION FL 33322 Zip Code FL 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 DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10.-Election Campaign Financing-\$5.00 May Be Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition TITLE ☐ Delete TITLE SU HAM. TULIO NAME NAME 10700 NW 18 COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PLANTATION FL 33322 City-St-ZIP Addition ☐ Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7(P CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information by Signature shall have the same legal effect as if made under oath; that I am an officer or director as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 13. I hereby certify that the information supplied with this filing does not of all indicated on this report or supplemental report is true and acquirate and the supplemental report is true and the supplemental repo of the corporation or the receiver or trustee empowered to a changed, or on an attachment with an address, wijnvall other