

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000050357

1. Entity Name
Brendy's YOGURT & ICE Cream III, INC

FILED
00 SEP 20 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 23313 SW 861st Ave
Boca Raton, FL 33428

Mailing Address

2. Principal Place of Business 85030 Champion Blvd
Suite, Apt. #, etc. Suite B-2
City & State Boca Raton FL
Zip 33496 Country US

3. Mailing Address 10042 Lexington
Suite, Apt. #, etc. Estates Blvd.
City & State Boca Raton FL
Zip 33428 Country US

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-075595

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
Wahid Mahmood
10042 Lexington Estates Blvd.
Boca Raton, FL 33428

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.

SIGNATURE Wahid Mahmood P Wahid Mahmood 9/11/2000
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 NAME STREET ADDRESS CITY-ST-ZIP	P/Wahid Mahmood 10042 Lexington Estates Blvd Boca Raton FL 33428	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V= Patricia Mahmood 10042 Lexington Estates Blvd Boca Raton, FL 33428
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V= Patricia Mahmood 10042 Lexington Estates Blvd Boca Raton FL 33428	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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: Wahid Mahmood 9/11/2000 561-376-8070
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR. Date Daytime Phone #

CR2E034 (9/99)