

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 13, 2001 8:00 am
Secretary of State

08-13-2001 90095 049 ***150.00

0012511 AV

DOCUMENT # P97000069790

1. Entity Name

SUNSHINE REFRESHMENT SERVICES, INC.

Principal Place of Business

**901 DOUGLAS AVENUE
 SUITE 100
 ALTAMONTE SPRINGS FL 32714**

Mailing Address

**185 DRENNAN RD
 STE 351
 ORLANDO FL 32806
 US**

2. Principal Place of Business

185 Drennan Rd

3. Mailing Address

Same AS

Suite, Apt. #, etc.

SUITE 351

Suite, Apt. #, etc.

ABOVE

City & State

ORLANDO FL

City & State

4. FEI Number

59-3462900

Applied For

Not Applicable

Zip

32806

Country

ORANLE

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**LUCIA, FRANK
 185 DRENWEN RD STE 351
 ORLANDO FL 32806**

7. Name and Address of New Registered Agent

Name **FRANK LUCIA**

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 **FRANK LUCIA**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

8/1/01

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 \$550.00
 After September 12, 2001 Fee will be \$750.00
 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

TITLE **D** ☐ Delete
 NAME **BENNETT, JOHN**
 STREET ADDRESS **185 DRENNAN RD**
 CITY-ST-ZIP **ORLANDO FL 32806**

TITLE **D** ☐ Delete
 NAME **ULLO, PHILIP P**
 STREET ADDRESS **185 DRENNAN RD**
 CITY-ST-ZIP **ORLANDO FL 32806**

TITLE **D** ☐ Delete
 NAME **LUCIA, FRANK**
 STREET ADDRESS **185 DRENNAN RD**
 CITY-ST-ZIP **ORLANDO FL 32806**

TITLE **D** ☐ Delete
 NAME **LAWLOR, MICHAEL**
 STREET ADDRESS **185 DRENNAN RD**
 CITY-ST-ZIP **ORLANDO FL 32806**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. 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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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:

FRANK LUCIA

8/1/01

407 251-8195

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)

Attachment



797 0000 69790

C0075202

8/1/01

To Whom It May Concern,

This letter is to inform
you that Sunshine Refreshment
Services Inc. never received 1st
copy of this Business Report

I am sending this letter
enclosed with original final fee
as per your instructions.

Thank You
Frank Lucia
President

