

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jul 19, 2000 8:00 am  
Secretary of State

07-19-2000 90007 010 \*\*\*550.00

DOCUMENT # P97000103808

1. Entity Name

MARY'S SIMPLY THE BEST & CO.

Principal Place of Business

510 JEFFERSON DR  
DEERFIELD BCH FL 33442

Mailing Address

510 JEFFERSON DRIVE  
#106  
DEERFIELD BEACH FL 33442

2. Principal Place of Business

2910 NW 26<sup>th</sup> Ave.

Suite, Apt. #, etc.

Boca Raton Florida

City & State

Zip  
33434

Country

USA

3. Mailing Address

2910 NW 26<sup>th</sup> Ave.

Suite, Apt. #, etc.

City & State

Boca Raton FL

Zip  
33434

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0798126

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

GIUSEFFI-CRUM, MARY  
510 JEFFERSON DR APT 106  
DEERFIELD BCH FL 33442

7. Name and Address of New Registered Agent

Name

Giuseffi, Mary

Street Address (P.O. Box Number is Not Acceptable)

2910 NW 26<sup>th</sup> Ave.

City

Boca Raton FL

FL

Zip Code

33434

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

*Mary Giuseffi*

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

(NOTE: Registered Agent signature required when reinstating)

7-12-00

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. 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 **P** ☐ Delete  
NAME **GIUSEFFI, MARY**  
STREET ADDRESS **510 JEFFERSON DR APT 106**  
CITY-ST-ZIP **DEERFIELD BEACH FL 33442**

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **2910 NW 26<sup>th</sup> Avenue**  
CITY-ST-ZIP **Boca Raton, FL 33434**

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

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
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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:

*Mary Giuseffi*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-12-00

Date

381-213-7629

Daytime Phone #