

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 15, 2001 8:00 am**  
**Secretary of State**

05-15-2001 90087 026 \*\*\*150.00

**DOCUMENT # P98000013286**

1. Entity Name

**TACO TWO BAKERSFIELD, CORP.**

Principal Place of Business

**13033 BRIMHALL RD  
 BAKERSFIELD CA 93312**

Mailing Address

**13033 BRIMHALL RD  
 BAKERSFIELD CA 93312**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **77-0483463**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

**JAFFEE, CHARLES L  
 1701 W HILLSBORO BLVD, STE 303  
 DEERFIELD BEACH FL 33442**

7. Name and Address of New Registered Agent

Name

**Tumminello, Frank**

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

**19333 Collins Ave, Apt 2703**

City

**Sunny Isles**

**FL**

Zip Code

**33160**

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 Tumminello, Pres.**

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, 2001 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

TITLE **P** ☐ Delete  
 NAME **TUMMINELLO, FRANK**  
 STREET ADDRESS **600 SOLAR ISLE DR**  
 CITY-ST-ZIP **FT LAUDERDALE FL 33301**

TITLE **VP** ☒ Delete  
 NAME **SHERRER, ROBERT**  
 STREET ADDRESS **9902 RANCHO VERDE DR**  
 CITY-ST-ZIP **BAKERSFIELD CA 93311**

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 **P** ☒ Change ☐ Addition  
 NAME **Tumminello, Frank**  
 STREET ADDRESS **19333 Collins Ave, Apt 2703**  
 CITY-ST-ZIP **Sunny Isles, FL 33160**

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

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

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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:

*Frank Tumminello*

**Frank Tumminello**

Date

**5-25-01**

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)