

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000034396

1. Entity Name

RUBY'S PIZZA, PASTA & SUBS, INC.

**FILED**  
**May 16, 2001 8:00 am**  
**Secretary of State**

05-16-2001 90035 047 \*\*\*150.00

Principal Place of Business

614 SE 10TH ST  
DEERFIELD BEACH FL 33441

Mailing Address

614 SE 10TH ST  
DEERFIELD BEACH FL 33441

040004



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **NOT APPLICABLE**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BOUTWELL, ROBERT  
410 E HILLSBORO BLVD  
1ST FLOOR OFFICE  
DEERFIELD BEACH FL 33441

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

JAN 20 '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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
NAME PT  
STREET ADDRESS MURO, JAMES  
CITY-ST-ZIP 614 SE 10TH ST  
DEERFIELD BEACH FL 33441

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

TITLE ☐ Delete  
NAME V  
STREET ADDRESS CAPPELLETTI, GREGG  
CITY-ST-ZIP 614 SE 10TH ST  
DEERFIELD BEACH FL 33441

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

TITLE ☒ Delete  
NAME S  
STREET ADDRESS DLUZEK, JAMES  
CITY-ST-ZIP 614 SE 10TH ST  
DEERFIELD BEACH FL 33441

TITLE ☒ Change ☒ Addition  
NAME S  
STREET ADDRESS Gregg Capelletti  
CITY-ST-ZIP 614 SE 10TH ST  
DEERFIELD BEACH FL 33441

TITLE ☐ Delete  
NAME D  
STREET ADDRESS BOUTWELL, ROBERT  
CITY-ST-ZIP 410 HILLSBORO BLVD  
DEERFIELD BEACH FL 33441

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 20 '01

Date

368-2761

Daytime Phone #

CR2E034 (10/00)