

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 04, 2002 8:00 am**  
**Secretary of State**

08-04-2002 90165 024 \*\*\*300.00

**DOCUMENT # P98000048339**

1. Entity Name  
**GOULASH CHARDA CORPORATION**

Principal Place of Business  
**2215 N. FEDERAL HIGHWAY  
 HOLLYWOOD FL 33020**

Mailing Address  
**2215 N. FEDERAL HIGHWAY  
 HOLLYWOOD FL 33020**



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 **65-0839390**

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

**HELFFY, SZILARD  
 2215 N. FEDERAL HIGHWAY  
 HOLLYWOOD FL 33020**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (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 \$550.00  
 After September 13, 2002 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
 NAME **D KONYECSKI, DORA**  
 STREET ADDRESS **1935 ADAMS STREET**  
 CITY-ST-ZIP **HOLLYWOOD FL 33020**

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

TITLE ☐ Delete  
 NAME **D BALLA, LASLO**  
 STREET ADDRESS **1935 ADAMS STREET**  
 CITY-ST-ZIP **HOLLYWOOD FL 33020**

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

TITLE ☐ Delete  
 NAME **D HELFFY, SZILARD**  
 STREET ADDRESS **2215 N. FEDERAL HIGHWAY**  
 CITY-ST-ZIP **HOLLYWOOD FL 33020**

TITLE ☒ Change ☐ Addition  
 NAME **D.P HELFFY SZILARD**  
 STREET ADDRESS **2215 N FED HWY**  
 CITY-ST-ZIP **HOLLYWOOD FL 33020**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE ☐ Delete  
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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: **X** *[Signature]* **07/26/02**

CR2E034 (4/02)

Attachment 972277  
# P980000 48339

**GOULASH CHARDA CORPORATION**  
**2215 N FEDERAL HIGHWAY**  
**HOLLYWOOD FL 33020**  
**Ph. 954-926-3355**

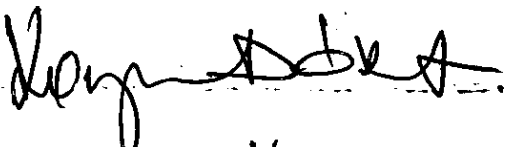
July 26<sup>th</sup>, 2002

*RE: 2002 Uniform Business Report*

*Dear Division Of Corporations,*

*Please, be advised that we never received any forms for annual filing before we this 60 days notice came. Based on our phone conversation with you please, wave our penalty and reactivate our corporation.*

*Sincerely,*



Helfy, Szilard  
Director

KONYECSEI, DOKA  
DIRECTOR