## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT #

P98000066083

1. Entity Name

SQUIGGY'S PIZZERIA, INC.



**FILED** Jan 08, 2003 8:00 am Secretary of State 01-08-2003 90008 012 \*\*\*150.00

				GOD WE	Trus				
Principal Place of Business 207 SW 2ND STREET FT LAUDERDALE FL 33301			Mailing Address 207 SW 2ND STREET FT LAUDERDALE FL 33301						
								<b>       </b>	
2. Principal Place	e of Business	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State	City & State			6541X52410		Applied For Not Applicable	
Zip Country		Zip	Zip Cour		5. Certificate of Status Desired		\$8.75 Additional Fee Required		
	6. Name and Address of Curr	ent Registered Agent			7. 1	Name and Address of New Registe	red Agent		
			· · ·	Name					
SERLE, STEV			Street Ad	dress (PO B	ov Number is Not Acceptable)		<u> </u>		
2101 CORPO	rate blvd n.W.			Ci.out No	G1000 (1.0. E	ox rames is not recopiazie,			
STE 325									
BOCA RATO	N FL 33431		Clty			•	FL Zip	Code	
8. The above nar	med entity submits this statemer	nt for the purpose of changing	na its reaister	ed office or i	registered ag	ent, or both, in the State of Florida.	l am familiar	with, and accept	
	s of registered agent.	, ,	SS  CHECK HERE IF MAKING CHANGES  4. FEI Number 65-0852410   Applied For Not Applied For Required  7. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  City   FL   Zip Code    City   FL   Zip Code    In Interpretation   Date    9. Election Campaign Financing   S5.00 May Be Added to Fees    11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11    Interpretation   Change   Addition    Richards   Randy   Addition    Richards   Randy   Addition    Richards   Randy   Addition    STREET ADDRESS   City ST-Zip   Change   Addition    STREET ADDRESS   City ST-Zip   Change   Addition    STREET ADDRESS   City ST-Zip   Change   Addition    STREET ADDRESS   City ST-Zip   Addition    STREET ADDRESS						
OLONATURE									
SIGNATURE	nature, typed or printed name of registered a	gent and title if applicable.	(NOTE: Registere	d Agent signatur	e required when re	einstating) D	ATE	<del></del>	
FILE	NOW!!! FEE IS \$150.00								
	ay 1, 2003 Fee will be \$550.	00				, , , , , , , , , , , , , , , , , , , ,			
Make Check Pa	yable to Florida Departmer	it of State				Trust Furia Contribution.		Added to Fees	
10.	OFFICERS A	ND DIRECTORS	RECTORS 11.		AD	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1		CTORS IN 11	
TITLE P		☐ Delete	TITL	Ε	•		☐ Cł	ange	
	STE 325								
	DCA RATON FL 33431				4 APPS TV				
TITLE S1		<b>⊠</b> Delete		E	Oichan	le Randy	☐ CF	iange 🔀 Addition	
NAME RI	CHARDS, ELIZABETH 101 CORPORATE BLVD NW	STE 325		ET ADDRESS	2101 6	orporete Blue, NW 5	te 325		
	OCA RATON FL 33431	OIL OZJ		- ST-ZIP	Boom 1	Rayton, Pl- 33431			
TITLE			-TITI	-					
NAME			- M						
STREET ADDRESS				_					
CITY-ST-ZIP									
Π̈́τLE	<del></del>	☐ Delete	TITLE	<u> </u>			☐ CI	nange	
NAME			NAM						
STREET ADDRESS			STRE	ET ADDRESS					
CITY-ST-7IP			CITY	- ST-7IP					

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

**SIGNATURE:** 

TITLE

NAME

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

☐ Delete

☐ Delete

☐ Change

Change

Addition

☐ Addition