

**FOR PROFIT CORPORATION,
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P98000093663

1. Entity Name **VALUE DINING OF PEMBROKE PINES, INC.**

FILED
Jun 20, 2002 8:00 am
Secretary of State

06-20-2002 90056 009 ***150.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
7333 Coral Way

Suite, Apt. #, etc.

3. Mailing Address
7333 Coral Way

Suite, Apt. #, etc.

City & State
Miami, FL

Zip
33155

Country
U.S.A.

City & State
Miami, FL

Zip
33155

Country
U.S.A.

4. FEI Number
65-0886951

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

7. Name and Address of Current Registered Agent

Name
World Dining Corporation
Street Address (P.O. Box Number is Not Acceptable)

7333Coral Way

City
Miami

FL Zip Code
33155

**DO NOT WRITE
IN THIS SPACE**

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 use if applicable

(NOTE: Registered Agent signature required when reissuing)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$81.25
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
NAME
STREET ADDRESS
CITY-ST-ZIP
DCEO
Anthony L. Davide
7333 Coral Way, Miami, FL 33155

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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CITY-ST-ZIP

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/31/2002
Date

305-961-0000
Daytime Phone #

CR2E034B (12/01)



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

REC'D MAY 30 2002

Attachment

870141

May 16, 2002

VALUE DINING OF PEMBROKE PINES, INC.
7333 CORAL WAY
MIAMI, FL 33155

Subject: **VALUE DINING OF PEMBROKE PINES, INC.**

Reference Number: **P98000093663**

Please be advised, we have received your annual report/uniform business report; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please sign and return your check submitted with the annual report/uniform business report.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850)-488-9000.

/RG
ANNUAL REPORTS SECTION