

# UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 998000099893

Entity Name

ALOHA ENTERPRISES, INC

Principal Place of Business

Mailing Address

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 AUG 28 AM 8:00

2. Principal Place of Business

1421 SOUTH OCEAN DRIVE

Suite, Apt. #, etc.

3. Mailing Address

1421 SOUTH OCEAN DRIVE

Suite, Apt. #, etc.

REINSTATEMENT

02-03

DO NOT WRITE IN THIS SPACE

MRB

City & State

FORT LAUDERDALE, FL

City & State

FORT LAUDERDALE, FL

4. FEI Number

65-0880396

Applied For

Not Applicable

Zip

33316

Country

USA

Zip

33316

Country

USA

5. Certificate of Status Desired

X

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

WAYNE MASCOLO

1421 SOUTH OCEAN DRIVE

FORT LAUDERDALE, FL 33316

7. Name and Address of New Registered Agent

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

WAYNE MASCOLO, PRESIDENT 8/26/2003

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, 2000 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	D/P/T	<input type="checkbox"/> Delete
NAME	WAYNE MASCOLO	
STREET ADDRESS	1421 SOUTH OCEAN DRIVE	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33316	
TITLE	D/V	<input type="checkbox"/> Delete
NAME	MARILYN MASCOLO	
STREET ADDRESS	1421 SOUTH OCEAN DRIVE	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33316	
TITLE	D/V/S	<input type="checkbox"/> Delete
NAME	WENDY MASCOLO	
STREET ADDRESS	1421 SOUTH OCEAN DRIVE	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33316	
TITLE	D/V	<input type="checkbox"/> Delete
NAME	DONNA MASCOLO	
STREET ADDRESS	1511 HIGHWAY A1A UNIT 2401	
CITY-ST-ZIP	INDIAN HARBOR BEACH, FL 32937	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 19.07(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

8/26/2003 (954) 462-7245

CR2E034 (9/99)

**Aloha Enterprises, Inc.**  
1421 South Ocean Drive  
Fort Lauderdale, FL 33316

August 26, 2003

**Florida Department of State**  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

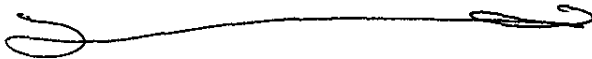
Re: Aloha Enterprises, Inc. (P98000099893) Annual Report

Dear Sir or Madam,

During a recent internet search, we noted that you show our company as inactive in your records. We have no record of having received an annual report for 2002 or 2003. Therefore, we have enclosed a check payable to the Department of State in the amount of \$308.75, representing the annual fee of \$150.00 for 2002, \$150.00 for 2003, and for the certificate of status fee of \$8.75.

Please accept our report and our payment as payment in full as we did not receive an annual report notice. Thank you for your consideration and cooperation in this matter. Also, please note address changes for the company officers. Thank you for your assistance.

Very Truly Yours,



Wayne A. Mascolo, President