

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000100061

1. Entity Name

A TASTEFUL AFFAIR, INC.

FILED
Jan 28, 2000 8:00 am
Secretary of State

01-28-2000 90165 006 ***150.00

Principal Place of Business

Mailing Address

7930 CAMPBELL RD.
SARASOTA FL 34240

7930 CAMPBELL RD.
SARASOTA FL 34240-9158

2. Principal Place of Business

1314 Tenth St

3. Mailing Address

7930 Campbell Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Sarasota, Florida

City & State
Sarasota, Florida

4. FEI Number 65-0878636

Applied For
Not Applicable

Zip
34236

Country
USA

Zip
34240

Country
USA

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

LAUD, CAROLINE L
7930 CAMPBELL RD.
SARASOTA FL 34240

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

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
NAME
STREET ADDRESS
CITY-ST-ZIP
PSD
LAUD, CAROLINE L
7930 CAMPBELL RD.
SARASOTA FL 34240 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VTD
CROMPTON, ANDREW P
7930 CAMPBELL RD.
SARASOTA FL 34240 ☐ Delete

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

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CITY-ST-ZIP
☐ Change ☐ Addition

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: Caroline Laud, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-14-00 941-330-8373
Date Daytime Phone #

CR2E034 (9/99)