

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000101198

1. Entity Name

FIRST CHOICE FOOD & DELI, INC.

FILED
Jan 21, 2000 8:00 am
Secretary of State

01-21-2000 90085 003 ***150.00

Principal Place of Business

5088 LAKE VALENCIA BOULEVARD EAST
PALM HARBOR FL 34684

Mailing Address

5088 LAKE VALENCIA BOULEVARD EAST
PALM HARBOR FL 34684-4011

2. Principal Place of Business

Food

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3545126

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134

Name

IZEDDIN SUHWEIL

Street Address (P.O. Box Number is Not Acceptable)

5088 LAKE VALENCIA BLVD E

City

PALM HARBOR

FL

Zip Code

34684

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

Izeddin Suhweil IZEDDIN SUHWEIL 1/8/00

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)

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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.

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\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PSTD
NAME SUHWEIL, IZEDDIN S
STREET ADDRESS 5088 LAKE VALENCIA BOULEVARD EAST
CITY-ST-ZIP PALM HARBOR FL 34684

☐ Delete

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ 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:

Izeddin Suhweil IZEDDIN SUHWEIL 1/8/00 727-799-1465

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)