

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 20, 2001 8:00 am
Secretary of State

04-20-2001 90028 003 ***150.00

DOCUMENT # **99000000877**

1. Entity Name

CAFÉ CALIFORNIA OF CITRUS PARK, INC.

Principal Place of Business

Mailing Address

**8007 CITRUS PARK
TOWN CENTER MALL,
Tampa, FL 33625**

*** 2216 CLIMBING IVY DR.
Tampa, FL 33618-1711**

2. Principal Place of Business

3. Mailing Address

8007 CITRUS PARK TOWN CTR.

2216 Climbing Ivy Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Tampa, FL

Tampa, FL

4. FEI Number

☒ Applied For

☐ Not Applicable

59-3550871

- Zip - **33625**

- Country - **USA**

- Zip - **33618-1711**

- 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

Cheng-Fu Jen
*** 2216 Climbing Ivy Dr.**
Tampa, FL 33618-1711
(*Note: NEW ADDRESS)

Name **Cheng-Fu Jen (same person)**
Street Address (P.O. Box Number is Not Acceptable)
*** 2216 Climbing Ivy Dr.***
Tampa, FL
City **FL** Zip Code **33618-1711**

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

PRESIDENT

4-8-2001

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, 2001 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 **VICE PRESIDENT** ☐ Delete
NAME **PHILLIP GULU**
STREET ADDRESS **1507 DEERBOURN DR.**
CITY-ST-ZIP **WESLEY CHAPEL, FL 33543**

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

TITLE **SECRETARY** ☐ Delete
NAME **K.C. CHEN**
STREET ADDRESS **8201 KIRKWOOD DR.**
CITY-ST-ZIP **TAMPA, FL 33634**

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

TITLE **PRESIDENT** ☐ Delete
NAME **CHENG-FU JEN**
STREET ADDRESS **2216 Climbing Ivy Dr.**
CITY-ST-ZIP **Tampa, FL 33618-1711**

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

TITLE ☐ Delete
NAME ☐ Delete
STREET ADDRESS ☐ Delete
CITY-ST-ZIP ☐ Delete

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

TITLE ☐ Delete
NAME ☐ Delete
STREET ADDRESS ☐ Delete
CITY-ST-ZIP ☐ Delete

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

TITLE ☐ Delete
NAME ☐ Delete
STREET ADDRESS ☐ Delete
CITY-ST-ZIP ☐ Delete

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-8-2001 813-254-0532

Date

Daytime Phone #

CR2E034 (11/00)