2001 UNIFORM BUSINESS REPORT (UBR) FILED May 14, 2001 8:00 am DOCUMENT # **P99000007786** Secretary of State 1. Entity Name MARGARITA ENTERPRISES, INC. 05-14-2001 90202 014 ***150.00 Principal Place of Business Mailing Address 741 W. OAKLAND PARK BLVD. 741 W. OAKLAND PARK BLVD. (00000 FT.LAUDERDALE FL 33311 FT.LAUDERDALE FL 33311 2. Principal Place of Business Mailing Address Commercial Blue 3050 East Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number **NOT APPLICABLE** Applied For FORT 1 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 33308 Fee Required 6.-Name and Address of Current Registered Agent 7.-Name and Address of New Registered Agent MIDDLETON, ANNE 741 W. OAKLAND PARK BLVD. FT.LAUDERDALE FL 33311 City s fatement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named en W. Waters JR SIGNATURE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. Delete CR2E034 (10/00) TITLE Richard W. Waters JR. 3050 East Commercial Blud WATERS, RICHARD W NAME STREET ADDRESS STREET ADDRESS 741 W OAKLAND PARK BLVD CITY-ST-ZIP CITY-ST-ZIP Fort Lauderdale, FL FORT LAUDERDALE FL 33311 TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling 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/s 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.

CITY-ST-ZIP

TITLE

NAME

☐ Delete

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-7IP

UHE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STREET ADDRESS

4/27/2001

☐ Addition