

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000013970

1. Entity Name

NEW YORK PIZZA, INC.

**FILED**  
**Mar 20, 2000 8:00 am**  
**Secretary of State**

03-20-2000 90125 042 \*\*\*150.00

Principal Place of Business

118 WEST ORANGE STREET  
ALTAMONTE SPRINGS FL 32714

Mailing Address

118 WEST ORANGE STREET  
ALTAMONTE SPRINGS FL 32714-2537

2. Principal Place of Business

70800 S Hwy 17-92  
Suite, Apt. #, etc.

3. Mailing Address

70800 S Hwy 17-92  
Suite, Apt. #, etc.

City & State

Fern Park FL

City & State

Fern Park FL

4. FEI Number

59-3554740

Applied For

Not Applicable

Zip

32730

Country

USA

Zip

32730

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name

Eduard Daron

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

70800 S. Hwy 17-92

City

Fern Park

FL

Zip Code

32730

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

*Eduard Daron*  
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

TITLE PSTD  
NAME DARONA, EDUARD  
STREET ADDRESS 118 WEST ORANGE STREET  
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition

NAME  
STREET ADDRESS 70800 S. Hwy 17-92  
CITY-ST-ZIP Fern Park FL 32730

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ 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 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:

*Eduard Daron*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(407) 830-8585

Daytime Phone #