

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000019165

1. Entity Name

ZAZZARINO, INC.

DBA: P122A MUUU

Principal Place of Business

933 Normandy Drive
Miami Beach, FL 33141

Mailing Address

933 Normandy Drive
Miami Beach, FL 33141

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0920564

Applied For

Not Applicable

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

Richard Wasserstein
913 Normandy Drive
Miami Beach, FL 33141

Name

KTC&S Registered Agent Corporation

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

100 S.E. 2nd Street, 28th Floor

City

Miami

FL

Zip Code

33131

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

Michael Kosnitzky, President

4/20/00

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)

☐

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
D/P/T
Luis Gajer
933 Normandy Drive
Miami Beach, FL 33141

☐ Delete

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

TITLE
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D/V/S
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933 Normandy Drive
Miami Beach, FL 33141

☐ Delete

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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:

Luis Gajer, President 4/20/00

(305) 861-2300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

FILED
May 09, 2000 8:00 am
Secretary of State

02-29-2000 90186 032 ***150.00

05-09-2000 90075 034 ***150.00

B0082976

DO NOT WRITE IN THIS SPACE

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