

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 10, 2002 8:00 am**  
**Secretary of State**

07-10-2002 90182 010 \*\*\*150.00

**DOCUMENT # P99000019186**

1. Entity Name  
**TED FOOD SERVICES INC.**

Principal Place of Business  
**218 COMMERCIAL BLVD.  
 LAUDERDALE BY THE SEA FL 33308**

Mailing Address  
**218 COMMERCIAL BLVD.  
 LAUDERDALE BY THE SEA FL 33308**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0907049**

Applied For  
 Not Applicable

Zip

Country

Zip

Country

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

**TEDESCO, ALBERT  
 1501 N.E. 38TH STREET  
 OAKLAND PARK FL 33334**

Name **ALBERT TEDESCO**  
 Street Address (P.O. Box Number is Not Acceptable)  
**5810 NE 20 AVE**  
 City **FT LAUDERDALE FL** Zip Code **33308**

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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

**ALBERT TEDESCO**

**7-3-02**

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 \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**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 **PD**  
 STREET ADDRESS **TEDESCO, JULIE**  
 CITY-ST-ZIP **1501 N.E. 38TH STREET  
 OAKLAND PARK FL 33334** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS **5810 NE 20 AVE** ☒ Change ☐ Addition  
 CITY-ST-ZIP **FT LAUDERDALE FL 33308**

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

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

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 CITY-ST-ZIP ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 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: Julie Tedesco**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7-2-02 954-928-0499**

Date

Daytime Phone #

CR2E034 (4/02)

Attachment B0128091  
Doc. P95000019186

July 4<sup>th</sup> 2002.

Dear Sir/Madam,

As I did not receive  
any notice prior to this, I now enclose  
the completed report and a cheque  
for the original \$150.00 filing fee.

Yours Sincerely

Julie Tedesco  
-owner-