2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2002 8:00 am
Secretary of State
04-03-2002 90492 037 ***150.00

039023 AV

DOCUMENT # **P99000023669**

1. Entity Name
FROZEN PRODUCTS & SERVICES, INC.

Principal Place of Business	Mailing Address
4113 SAPPHIRE BEND FT. LAUDERDALE FL 33331	4113 SAPPHIRE BEND FT. LAUDERDALE FL 33331

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
2761 West 77 Place		1749 Harbor View Circle	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: Hialeah Florida		City & State: Weston. Florida	
Zip: 33016	Country: USA	Zip: 33327	Country: USA

4. FEI Number 65-0901488 — ☑ 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
JIMENEZ, GONZALO 4113 SAPPHIRE BEND FT. LAUDERDALE FL 33331	Name ~~JIMENEZ, GONZALO~~ Street Address (P.O. Box Number is Not Acceptable) 1749 Harbor View Circle City Weston **FL** Zip Code 33327

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 ____________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2002 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 JIMENEZ, GONZALO 4113 SAPPHIRE BEND FT. LAUDERDALE FL 33331	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JIMENEZ, GONZALO 1749 Harbor View Circle Weston - FL 33327	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JIMENEZ, OLGA 4113 SAPPHIRE BEND FT. LAUDERDALE FL 33331	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VARJA, OLGA 1749 Harbor View Circle Weston. FL 33327	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (9/01)

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] 03/25/02 305-8213636
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — GONZALO JIMENEZ — Date — Daytime Phone #