

2000 UNIFORM BUSINESS REPORT (UBR)

1052

DOCUMENT # P99000023986

1. Entity Name

MEGA EXPRESS CAFE, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

00 SEP 25 PM 12:26

Principal Place of Business

1650 W. MCNAB ROAD
FT. LAUDERDALE FL 33310

Mailing Address

1650 W. MCNAB ROAD
FT. LAUDERDALE FL 33310

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

65-0904158

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DELGARDIO, MICHAEL
1650 W. MCNAB ROAD
FT. LAUDERDALE FL 33310

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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, 2000 Min. 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P
DELGARIDO, MICHAEL
1650 W. MCNAB ROAD
FT. LAUDERDALE FL 33310

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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CITY-ST-ZIP

☐ Change ☐ Addition

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100003408401
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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 information empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/28/00 (84)952127

CR20034 115/001

20F2

9/20/00

To the DIVISION OF CORPORATIONS UNIFORM
BUSINESS REPORT FILINGS,

I CALLED YOUR BUSINESS OFFICE TODAY AND
TOLD THEM THAT I NEVER RECEIVED ANYTHING-
SHOWING ME OR TELLING THAT THERE WAS A
2000 UNIFORM BUSINESS REPORT TO BE PAID FOR
THE CORPORATION BEFORE SEPTEMBER 13, 2000 ,
AND I WAS NOT AWARE OF ANYTHING BEFORE I
RECEIVED THIS DOCUMENT#P99000023986 FOR
MEGA EXPRESS CAFE, INC. THE GIRL ON THE
TELEPHONE TOLD ME TO WRITE THIS LETTER TO
NOTIFY THIS SITUATION WHY THIS WAS NOT PAID
FOR, SHE TOLD ME TO SEND THIS LETTER OUT
TODAY WITH THE PAYMENT OF \$150.00, WOULD BE
AL RIGHT.

THANKYOU,

Michael Delgardio