**FILED** 

## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

## Mar 07, 2003 8:00 am § Secretary of State **DOCUMENT #** P99000032551 1. Entity Name 03-07-2003 90095 046 \*\*\*150.00 THE CHEESEBREAD HOUSE, INC. Principal Place of Business Mailing Address 1577 SW 1ST WAY 1577 SW 1ST WAY F-14 E-14 DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 65-0903461 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FINELLI, RICARDO Street Address (P.O. Box Number is Not Acceptable) 1577 SW 1ST WAY E14 DEERFIELD BEACH FL 33441 City Zip Code 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 8. The above named the obligations of SIGNATURE agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!! | FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Make Check Payable to Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE **PTDV** ☐ Delete TITLE Change ■ Addition NAME FINELLI, RICARDO NAME STREET ADDRESS 1577 SW 1ST WAY E14 STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH FL 33441 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: