

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000040589

1. Entity Name
TWO GUYS FOOD SERVICES, INC.

FILED
May 04, 2001 8:00 am
Secretary of State

05-04-2001 90128 019 ***150.00

Principal Place of Business

842 SE 1ST AVE
MIAMI FL 33131

Mailing Address

6890 S.W. 88TH ST. STE. B-403
MIAMI FL 33156

2. Principal Place of Business

3. Mailing Address

842 SE 1ST AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
MIAMI, FL

4. FEI Number 65-0928480

Applied For

Not Applicable

Zip

Country

Zip

33131

Country

USA

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

FORMAN, TERRY J
1521 S.W. LEJEUNE ROAD
CORAL GABLES FL 33134

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 \$150.00
After MAY 1, 2001 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
SPD
LUYTJES, MARTIN
6890 S.W. 88TH ST. STE. B-403
MIAMI FL 33156 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SPD PRES
LUYTJES, MARTIN
10975 SW 107 ST #312
MIAMI, FL 33131 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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☐ 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:

Martin Luytjes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARTIN LUYTJES

4/24/1

Date

(305) 358-8646

Daytime Phone #

CR2E034 (10/00)