

# 2000 UNIFORM BUSINESS REPORT (UBR)

3/2

DOCUMENT # P99000053263

1. Entity Name

BUZIOS RESTAURANT & TIKI BAR, CORP.

**FILED**  
**May 08, 2000 8:00 am**  
**Secretary of State**

03-28-2000 90081 007 \*\*\*150.00

Principal Place of Business Mailing Address  
1380 SOUTH OCEAN BLVD. 1380 SOUTH OCEAN BLVD.  
POMPANO BEACH FL 33062 POMPANO BEACH FL 33062-7158

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

650924870

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

MATTOS, MARCELO O  
1380 SOUTH OCEAN BLVD.  
POMPANO BEACH FL 33062

Name Jamie Beiter

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

1380 S. Ocean Blvd.  
Pompano Beach, FL. 33062

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

Jamie Beiter - President

3-2-00

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, 2000 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 DPT ☒ Delete  
NAME MATTOS, MARCELO O  
STREET ADDRESS 18151 NE 31ST COURT #807  
CITY-ST-ZIP AVENTURA FL 33160

TITLE P-T ☒ Change ☐ Addition  
NAME Jamie Beiter  
STREET ADDRESS 260 SE 9TH CT  
CITY-ST-ZIP Pump. Bch, FL. 33060

TITLE SDV P-T ☐ Delete  
NAME BEITER, JAMIE  
STREET ADDRESS 81 IVY ROAD  
CITY-ST-ZIP HOLLYWOOD FL 33021

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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

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:

Jamie Beiter

3-2-00

(404) 785-8980

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #