

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000062782

1. Entity Name

Brasliced Food Market, Inc

FILED

03 JAN -7 AM 10:58

Principal Place of Business

Mailing Address

1200 NE 48 Street #2

Pompano Bch FL 33064

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
600009923666  
01/07/03--01069--012 \*\*300.00

2. Principal Place of Business

SAME

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Jose Coelho

1200 NE 48 Street #2

Pompano Bch, FL 33064

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

Jose Coelho

1/3/2003

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. ☐

**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 PVT & D Jose Coelho ☐ Delete  
NAME  
STREET ADDRESS 1200 NE 48 Street #2  
CITY-ST-ZIP Pompano Bch, FL 33064

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  
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TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

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:

Jose Coelho

President

1/3/2003

538 724  
4141

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

# **CBS FINANCIAL, CPA, PA**

CERTIFIED PUBLIC ACCOUNTANTS AND CONSULTANTS

COMPREHENSIVE BUSINESS AND INDIVIDUAL FINANCIAL SOLUTIONS

January 3, 2003

Florida Department of State  
Division of Corporations  
Annual Reports Filings  
P.O. Box 6327  
Tallahassee, FL 32314-6327

Re: Brasliced Food Market, Inc.  
Form: 2002 & 2003 Uniform Business Reports  
Document #: P99000062782

Dear Madam/Sir,

We have been retained by the above referenced taxpayer recently as his CPA Firm.

During our initial interview with the taxpayer it was discovered that **they never received** the Florida's 2002 Uniform Business Report; therefore, they had not filed it. **Please note that the taxpayer has moved and has a new mailing address.**

Please find enclosed the properly completed 2002 & 2003 Uniform Business Reports and a check payable to the Florida State Department in the amount of \$300.00.

Please abate any late filing fees or other penalties Brasliced Food Market, Inc. did not intend to file late.

Please do not hesitate to contact our offices if you have any questions.

Sincerely,

Luis A. Escobar, Jr., CPA

Encl.: 2001 & 2002 Uniform Business Report  
Cc.: South Florida Marcite & Pool Service, Inc.