## 2001 UNIFORM BUSINESS REPORT (UBR) Apr 24, 2001 8:00 am Secretary of State DOCUMENT # P9900064882 ntity Name تر.1 DANA'S KITCHEN, INCORPORATED 04-24-2001 90292 005 \*\*\*150.00 Principal Place of Business Mailing Address 1604 NW 34 TERRACE 1604 NW 34 TERRACE LAUDERHILL FL 33311 LAUDERHILL FL 33311 UUU51696 2. Principal Place of Business 3. Mailing Address 800 NE STREET Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE <u> 2305</u> City & State City & State 4. FEI Number Applied For 65-0935819 m BM ന മെ ന Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DANA GOLDMAN, DANA R ddress (P.O. Box Number is Not Acceptable) 1604 NW 34 TERRACE LAUDERHILL FL 33311 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. Change ☐ Addition PTSD PTSD TITLE TITLE ☐ Delete 60CDMAN, DANA R 1800 NE 114+ ST + 2305 MIAMI, FC 3318/ NAME NAME GOLDMAN, DANA R STREET ADDRESS STREET ADDRESS 3255 NE 184TH ST. #12414 CITY-ST-ZIP CITY-ST-ZIP AVENTURA FL 33160 Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE Change ☐ Addition TITLE Delete TITI E NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change TITLE ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-7IP

**SIGNATURE:** 

CITY-ST-7IP

D-TML

Dana R. Goldma

4 / 16/01

(305)895-0637

Daytime Phone #