

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 91147 010 ***150.00

DOCUMENT # P99000004882 ✓

1. Entity Name

DANA'S KITCHEN, INCORPORATED

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1800 NE 114th ST

Suite, Apt. #, etc.

2305

City & State

MIAMI, FL

Zip

33181

Country

USA

3. Mailing Address

1800 NE 114th ST

Suite, Apt. #, etc.

2305

City & State

MIAMI, FL

Zip

33181

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0935819

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

DANA R. GOLDMAN

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

1800 NE 114th ST

2305

City

MIAMI

FL

Zip Code

33181

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

DANA R. GOLDMAN

5/1/02

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)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

P, S, T, D
DANA R. GOLDMAN
1800 NE 114th ST # 2305
MIAMI, FL 33181

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

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**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: DANA R. GOLDMAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(305)

895-0637

CR2E034B (12/01)