

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000074052

1. Entity Name
FRESH MONKEY, INC.

FILED

02 SEP 18 PM 3: 53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
1108 HIGHLAND BEACH DRIVE
SUITE 2
HIGHLAND BEACH FL 33487

Mailing Address
1108 HIGHLAND BEACH DRIVE
SUITE 2
HIGHLAND BEACH FL 33487

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 65-0943743

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

SAUL, LESLIE
1108 HIGHLAND BEACH DRIVE
SUITE 2
HIGHLAND BEACH FL 33487

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 P
NAME SAUL, LESLIE
STREET ADDRESS 1108 HIGHLAND BEACH DRIVE STE 2
CITY-ST-ZIP HIGHLAND BEACH FL 33487 ☐ Delete

TITLE
NAME 400008137884-2
STREET ADDRESS -10/02/02--01003--004
CITY-ST-ZIP *****150.00 *****150.00 ☐ Change ☐ Addition

TITLE V
NAME SCHUR, WILLIAM
STREET ADDRESS 1 ASH PLACE
CITY-ST-ZIP GREAT NECK NY 11021 ☐ Delete

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

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TITLE
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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: *Signature* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sept 6, 2002 563308422

CR2E034 (4/02)

Valz

I would greatly appreciate it if you would not charge me a late fee for this since it was totally out of my control.

Sincerely,

Rede Saul
Fresh Monkey, Inc.

THE UNIVERSITY OF CHICAGO