

# 000 UNIFORM BUSINESS REPORT (UBR)

5/2/00-90103-048-\$150.00-\$150.00

1842

DOCUMENT # P99000079201

1. Entity Name

ZOFIA EUROPEAN DELI, INC.

Principal Place of Business

Mailing Address

2663 E. ATLANTIC BLVD.  
POMPANO BEACH FL 33062

2663 E. ATLANTIC BLVD.  
POMPANO BEACH FL 33062-4309

2. Principal Place of Business

POMPANO BEACH

3. Mailing Address

2663 E. Atlantic Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

POMPANO BEACH, FL

City & State

POMPANO BEACH, FL

Zip

Country

Zip

Country

4. FEI Number

65-0863967

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SZCZEPKOWSKI, DORIS  
3701 N. COUNTRY CLUB DR.  
AVENTURA FL 33180

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when establishing)

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

TITLE: President  
NAME: Sofia Malasiewicz  
STREET ADDRESS: 2663 E. Atlantic Blvd.  
CITY-ST-ZIP: POMPANO BEACH FL 33062

☐ Delete

TITLE:   
NAME:   
STREET ADDRESS:   
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE:   
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:

☐ Change

☐ Addition

TITLE:   
NAME:   
STREET ADDRESS:   
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NAME:   
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:

*Sofia Malasiewicz*

APR 99 00

Signature and typed or printed name of signing officer or director

Date

Daytime Phone #

CR2E034 (9/99)

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**ZCZEPKOWSKI &  
MILLAN, P.A.**

Certified Public Accountants

September 1, 2000

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Re: Zofia European Deli, Inc.**  
**Document #: P99000079201**

To whom it may concern:

This letter is in response to your recent notice regarding the above-referenced corporation.

The corporation has received a notice that the filing of the annual report was untimely.

However, enclosed please find a check endorsed by your department on May 1, 2000, showing the timely filing of this return.

**I respectfully request that you update your records to reflect the timely filing of the return (copy enclosed).**

A confirmation of this request or explanation of other actions taken would be appreciated via mail or fax for your convenience at 954-927-0820.

Thank you in advance for your attention to this matter.

Please do not hesitate to contact me at 954-927-0807 if you have any questions, or if I may be of further assistance.

Very truly yours,

Doris Szczepkowski, CPA