

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000080250

1. Entity Name
Banana Split USA, Inc.

FILED
Mar 24, 2000 8:00 am
Secretary of State

03-24-2000 90067 039 ***150.00

Principal Place of Business Mailing Address

1210 Stirling Road, #7-B

Dania, FL 33004

C0044412

2. Principal Place of Business 3. Mailing Address

1210 Stirling Road, #7-B

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Dania, FL

City & State

4. FEI Number
65-0962653

Applied For

Not Applicable

Zip 33004

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

Name

David Torchin, C.P.A.

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

8211 West Broward Blvd.

Suite 200

City

Plantation

FL

Zip Code

33324

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

David Torchin, C.P.A.

Signature of current 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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P/D ☐ Delete
NAME Shlomo Melloul
STREET ADDRESS 1210 Stirling Road #7-B
CITY-ST-ZIP Dania FL 33004

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

TITLE VP/D ☐ Delete
NAME Yitzhak Mizhari
STREET ADDRESS 1210 Stirling Road #7-B
CITY-ST-ZIP Dania FL 33004

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
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Shlomo Melloul

3-15-00

Date

954-920-5500

Daytime Phone #

CR2E034 (9/99)