

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000091802

1. Entity Name  
LAKE WORTH MEATS, INC.

**FILED**  
Aug 17, 2000 8:00 am  
Secretary of State

08-17-2000 90572 048 \*\*\*550.00

Principal Place of Business

Mailing Address

~~0000 SUNSET STRIP~~  
~~SUNRISE FL 33322~~

~~0000 SUNSET STRIP~~  
~~SUNRISE FL 33322~~

2. Principal Place of Business

1300 South Dixie Hwy.

3. Mailing Address

1300 South Dixie Hwy.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Lake Worth, FL

City & State

Lake Worth, FL

4. FEI Number

65-0954977

Applied For

Not Applicable

Zip

33460

Country ~~PALM BEACH~~

~~BROWARD~~

Zip

33460

Country ~~PALM BEACH~~

~~BROWARD~~

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

LUJO, ROLANDO SR.

~~0000 SUNSET STRIP~~

~~SUNRISE FL 33322~~

Name

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

1300 South Dixie Hwy

City

Lake Worth

FL

Zip Code

33460

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 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, 2000 Min. 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 ☐ Delete  
NAME D  
STREET ADDRESS LUJO, ROLANDO SR.  
CITY-ST-ZIP ~~0000 SUNSET STRIP~~  
~~SUNRISE FL 33322~~

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 1300 South Dixie Hwy  
CITY-ST-ZIP Lake Worth, FL 33460

TITLE ☒ Delete  
NAME D  
STREET ADDRESS LUJO, ROLANDO JR.  
CITY-ST-ZIP ~~0000 SUNSET STRIP~~  
~~SUNRISE FL 33322~~

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 ☐ Delete  
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STREET ADDRESS  
CITY-ST-ZIP

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**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)