2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **P99000093632** Sep 05, 2000 8:00 am Secretary of State BLUE MARTINI, INC. 09-05-2000 90038 042 ***550.00 Principal Place of Business Mailing Address 1901 W. CYPRESS CREEK ROAD 1901 W. CYPRESS CREEK ROAD FORT LAUDERDALE FL 33309-1864 FORT LAUDERDALE FL 33309-1864 2. Principal Place of Business 3. Mailing Address 1901 W. Cypress Creek Road 550 South Rosemary Avenue Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite #244 Suite #406 City & State City & State 4. FEI Number Applied For 65-0958522 Fort Lauderdale, Florida Not Applicable West Palm Beach, Florida Ζίρ Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 33401 33309 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CHOSID, RICHARD G Street Address (P.O. Box Number is Not Acceptable) 1901 W. CYPRESS CREEK ROAD SUITE 406 FORT LAUDERDALE FL 33309-1864 City Zip Code FI 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. P/D ☐ Change TITLE ☐ Delete TITLE VASU, MARK E NAME NAME Vasu, Mark E. 1901 W. CYPRESS CREEK ROAD 1901 W. Cypress Creek Rd., Suite #406 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33309-1864 CITY-ST-ZIP Ft. Lauderdale, F1. 33309 ☐ Change TITLE ☐ Delete TITLE NAME NAME Vasu, Mark E. STREET ADDRESS STREET ADDRESS 1901 W. Cypress Creek Rd., Suite #406 CITY-ST-ZIP CITY-ST-ZIP Ft. Lauderdale, Fl. 33309 Change . ☐ Delete TITLE TITLE Т-NAME NAME Vasu, Mark E. STREET ADDRESS STREET ADDRESS 1901 W. Cypress Creek Rd., Suite #406 CITY-ST-ZIP CITY-ST-ZIP Ft. Lauderdale, Fl. 33309 Change ☐ Delete TITI F Addition TITI F S/D NAME NAME Day, Steven STREET ADDRESS STREET ADDRESS 1901 W. Cypress Creek Rd., Suite #406 CITY-ST-ZIP CITY-ST-ZIP Ft. Lauderdale, Fl. 33309 TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME

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 of 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 appears, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-7IP

SINVAYURE REQUIRED

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

August 31, 2000

(954) 351-1500

Daytime Phone #