

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 31, 2000 8:00 am
Secretary of State
 08-31-2000 90113 010 ***150.00

DOCUMENT # P99000097243

1. Entity Name

SARAH'S INTERNATIONAL MARKET, INC.

Principal Place of Business

1768 SW 22ND AVENUE
 MIAMI FL 33145

Mailing Address

1768 SW 22ND AVENUE
 MIAMI FL 33145

2. Principal Place of Business

690 East 25 Street

3. Mailing Address

1768 SW 22 Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Hialeah, Florida

City & State

Miami, Florida

4. FEI Number

05-0959055

Applied For

Not Applicable

Zip

33013

Country

Dade

Zip

33145

Country

Dade

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

IRVING, SARAH
1768 SW 22ND AVENUE
MIAMI FL 33145

7. Name and Address of New Registered Agent

Name

Sarah Coricada Irving

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

1768 SW 22 Avenue

City

Miami

FL

Zip Code

33145

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

TITLE **D** ☐ Delete
 NAME **IRVING, SARAH**
 STREET ADDRESS **1768 SW 22ND AVENUE**
 CITY-ST-ZIP **MIAMI FL 33145**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
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 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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 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:

SARAH'S INTERNATIONAL MARKET, INC.
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8-29-00 3054953010

CR2E034 (5/00)

8-29-00

To Whom it may
Concern:

I'm writing this
note to inform
you that I have
only received your
second notice -
never seeing a
first. Therefore I'm
mailing you a
check for \$150.⁰⁰/₁₀₀.

Thank you.

Sarah Peering
Owner

Sarah's Market &