

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000098280

1. Entity Name

IDRIS ENTERPRISES, INC.

**FILED**  
**May 22, 2000 8:00 am**  
**Secretary of State**

05-22-2000 90062 023 \*\*\*150.00

Principal Place of Business

7601 E. TREASURE DRIVE, #2303  
NORTH BAY VILLAGE FL 33141

Mailing Address

7601 E. TREASURE DRIVE, #2303  
NORTH BAY VILLAGE FL 33141-4370

2. Principal Place of Business

12th Street CAFE

3. Mailing Address

12th Street CAFE

Suite, Apt. #, etc.

232 12th Street

Suite, Apt. #, etc.

232 12th Street

City & State

MIAMI BEACH, FL

City & State

MIAMI BEACH, FL

Zip

33139

Country

DADE

Zip

33139

Country

DADE

4. FEI Number

65-0969258

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KUPELI, IDRIS  
7601 E. TREASURE DRIVE, #2303  
NORTH BAY VILLAGE FL 33141

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 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

TITLE	PD	<input type="checkbox"/> Delete
NAME	KUPELI, IDRIS	
STREET ADDRESS	7601 E. TREASURE DRIVE, #2303	
CITY-ST-ZIP	NORTH BAY VILLAGE FL 33141	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: IDRIS KUPELI (PRESIDENT) 05/01/00 (305) 538-9888

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)