

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000104838

1. Entity Name

**LUMINARY RESTAURANT CORPORATION**

**FILED**  
**May 09, 2000 8:00 am**  
**Secretary of State**

05-09-2000 90133 028 \*\*\*150.00

Principal Place of Business  
**17749 COLLINS AVENUE  
NORTH MIAMI BEACH, FL  
33169**

Mailing Address  
**17749 COLLINS AVENUE  
NORTH MIAMI BEACH, FL  
33169**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FFI Number  
**65-0965312**

Applied For  
Not Applicable

Zip

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

**FINEBERG, LIBO B. ESQ.  
3500 GATEWAY DRIVE, SUITE 201  
POMPANO BEACH, FLORIDA 33069-4870**

Name  
**PABLO ORIOLO**

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

**17749 Collins Avenue**

City  
**North Miami Beach**

**FL**

Zip Code  
**33169**

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

**April 21st, 2000**

Signature of entity or person name of registered agent and title of applicant

(NOTE: Registered Agent signature required when re-registering)

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  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**PSTD  
PASQUETTI, LUIGI  
17749 COLLINS AVENUE  
NORTH MIAMI BEACH, FL 33169** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**PVSTD  
PABLO ORIOLO  
17749 Collins Avenue  
North Miami Beach, Florida 33169** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**VD  
PASQUETTI, MARIA  
17749 COLLINS AVENUE  
NORTH MIAMI BEACH, FL 33169** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**S  
MARIAVITTORIA ADDONA  
17749 Collins Avenue  
North Miami Beach, Florida 33169** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
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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:

**April 21st, 2000 (305) 937-5787**