2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0000020573

1. Entity Name

K & S STEAK COMPANY, INC.



FILED Feb 17, 2003 8:00 am Secretary of State

02-17-2003 90170 050 ***150.00

	•	r.	SO WE	
Principal Place of Business 2047 E. IRLO BRONSON HIGHWAY KISSIMMEE FL 34744-4416		Mailing Address 2047 E. IRLO BRONSON KISSIMMEE FL 34744-441		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
2. Principal Place of Business		3. Mailing Address		T TOO THE CONTRACT IN THE CONTRACT OF THE CONT
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES
City & State		City & State		4. FEI-Number FO 2000F04 Applied For
Only & State				59-3626301 Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired See Required Fee Required
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent
			Name	
	i, harold L		Street Addr	dress (P.O. Box Number is Not Acceptable)
	RANGE AVENUE			16-18-18-18-18-18-18-18-18-18-18-18-18-18-
SUITE 800				7.04
	FL 32801		City	FL Zip Code
	ions of agent.	the year of		registered agent, or both, in the State of Florida. I am familiar with, and accept
	Similaria, typed at period agent	and title if applicable: (NOT	E: Registered Agent signature r	a required when reinstating)
Afte	MOW IT FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of	f State		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BATLEMENTO, JERRY 2047 E. IRLO BRONSON HIGHW KISSIMMEE FL 34744-4416	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	; - Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BALLESTEROS, EDWARD 2047 E. IRLO BRONSON HIGHW KISSIMMEE FL 34744-4416	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE .:		Delete	TITLE NAME	☐ Change ☐ Addition
STREET ADDRESS	[STREET ADDRESS	•

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE: -

CITY-ST-ZIP

JERRY SAF EMERICAL SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING

2-14-200

407-847:8050

Daytime Phone #