2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P01000024713 **DOCUMENT #**

1. Entity Name

DIS DAT. & D'OTHER PANTRY INC.



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

03-17-2003 91048 041 ***150.00

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME NAME NAME NAM	3.0,0,,		•		
Suite, Apt. #, etc.	918 PARK AVE		P.O. BOX 32113		•
Suite, Apt. #, etc.					
City & State City & FL Zip Codd City & FL	2. Principal Place of Business		3. Mailing Address		
Zip Country Zip Country S. Certificate of Status Desired S8.75 Additional Processing Process	Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES
S. Certification of Status Desired St. Additional Pour Registered Agent St. Certification of Status Desired St. Additional Pour Registered Agent St. Additional Pour Registered Agent St. Additional Pour Registered Agent St. Name and Address of New R			City & State		03-1043492
HUTTER, PAMELA 336 GOLFVIEW RD #618 N PALM BCH FL 33408 City City FL City FL Zip Cord- City Added to Fleet City FL Zip Cord- City FL Zip Cord- City Added to Fleet City FL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 FL City Added to Fleet City FL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 FL City Added to Fleet Ci	Zip		,	Country	Fee Required
HUTTER, PAMELA 336 GOLFMEW RD #618 N PALM BCH FL 33408 City FL Zip Code 6. 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. I am familiar with, and scoopt the obligations of registered agent, or both, in the State of Florida. I am familiar with, and scoopt the obligations of registered agent. SIGNATURE The NoWIT FEE IS \$150.00 After May 1, 2003 Fee with be \$550.00 Make Check Payable to Floridat Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 THE NOW. HUTTER, PAMELA 386 GOLFMEW RD #618 NPALM BCH FL 33408 THE NOW. SIRET ADDRESS OTY-51-2P THE NOW.		6. Name and Address of Current	Registered Agent	Namo	7. Name and Address of New Registered Agent
Stroet Address (P.O. Box Number is Not Acceptable) City FL Zip Code	HUTTER.	HUTTER, PAMELA			
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am tamillar with, and accept the obligations of registered agent. Signature File NOW!!! FEE IS \$150.00	336 GOL	FVIEW RD #618		Street Addre	ess (P.O. Box Number is Not Acceptable)
B. The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature File Fil	N PALM I	BCH FL 33408			
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indicated on this genort 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.

SIGNATURE:

Daytime Phone #