

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000031865

FILED  
Apr 28, 2003  
Secretary of State

Entity Name: BUFFALO SOLDIER ISLAND RESTAURANT, INC.

**Current Principal Place of Business:**

1143 AVE D  
FT PIERCE, FL 34950

**New Principal Place of Business:**

**Current Mailing Address:**

1143 AVE D  
FT PIERCE, FL 34950

**New Mailing Address:**

FEI Number: 65-1093685      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GRANT, VERONICA  
109 TROPIC COURT  
FT PIERCE, FL 34946      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: STEWART, LUTHER  
Address: 1143 AVE D  
City-St-Zip: FT PIERCE, FL 34950

Title: VTD ( ) Delete  
Name: REECE, LILLIETH  
Address: 1143 AVE D  
City-St-Zip: FT PIERCE, FL 34950

Title: SD ( ) Delete  
Name: THOMAS, ROBERT  
Address: 1143 AVE D  
City-St-Zip: FT PIERCE, FL 34950

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LILLIETH REECE

TREA

04/28/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date