

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 193506

1. Entity Name

PENINSULAR MEAT CO., INC.

FILED
Jan 26, 2000 8:00 am
Secretary of State

01-26-2000 90092 035 ***150.00

Principal Place of Business

Mailing Address

4024 W. ALVA ST.
TAMPA FL 33614-7057
US

4024 W. ALVA ST.
TAMPA FL 33614-7057
US

2. Principal Place of Business

4024 W. Alva St.

Suite, Apt. #, etc.

3. Mailing Address

4024 W. Alva St.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Tampa, FL

City & State

Tampa, FL

4. FEI Number

59-0776873

Applied For

Not Applicable

Zip

33614-7057

Country

U.S.A.

Zip

33614-7057

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GARDNER, BERNELL D
1002 TARAY DE AVILA
TAMPA FL 33613

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
MARKUS, JACQUELYN G
4312 BEACHWAY DR W
TAMPA FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
STD
Markus, Jacquelyn G.
4312 Beachway Dr. W
Tampa, FL ☒ Change ☐ Additio

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
GARDNER, ALMOGENE
1002 TARAY DE AVILA
TAMPA FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
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Gardner, Almogene
1002 Taray De Avila
Tampa, FL ☒ Change ☐ Additio

TITLE
NAME
STREET ADDRESS
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CD
GARDNER, BERNELL-D
1002 TARAY DE AVILA
TAMPA FL ☐ Delete

TITLE
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CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
DICKENS, JEANETTE G
49 W DEL RAY AVE
ALEXANDRIA VA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
Dickens, Jeanette G.
49 W Del Ray Ave.
Alexandria, VA ☒ Change ☐ Additio

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

 ☐ Change ☐ Additio

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: *Almogene Gardner*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jean S. Gardner, President 1/20/00

Date

Daytime Phone #