## 2003 FOR PROFIT CORPORATION

FILED Feb 24, 2003 8:00 am Secretary of State 02-03-2003 90114 024 \*\*\*150.00

UNIFORM BU	SINESS REPORT	(UBR)
DOCUMENT # 33  1. Entity Name HERBERTS LAFAYETTE MAR	36615 RKET, INC.	
Principal Place of Business	Mailing Address	
155 N COUNTY ROAD	155 N COUNTY ROAD	
P. O. BOX 631	P. O. BOX 631	ĺ
PALM BEACH FL 33480	PALM BEACH FL 33480	ļ
2. Principal Place of Business	3 Mailing Address	

1. Entity Name HERBERTS LAFAYETTE MARKET, INC.											
Principal Place of Business 155 N COUNTY ROAD P. O. BOX 631 PALM BEACH FL 33480		Mailing Address 155 N COUNTY ROAD P. O. BOX 631 PALM BEACH FL 33480  3. Mailing Address			<del></del>	- I NEGLER IN DR ANNO BANJA BANJA KARA BANJA BANJA BARA BANJA BARA BANJA BARA BANJA BARA BANJA BARA BANJA BANJA					
2. Principal Place of Business											
Suite, Apt. #, etc.			Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES					
City & State		City & State				4. FEI Number 59-1222721 Applied F				$\exists$	
Zip		Country	Zip	Coun	ntry		5. Certificate of Status Desired		\$8.75 A		le
	6. Name	and Address of Current	Registered Agent	<del></del>			*7. Name and Address of New R		Fee Requi	red	4
					Name			-Aisie160 \	-yent		$\dashv$
HERBER!	T, ELIZABETH	li <b>D.</b>			•						
1421 ALPHA CT. N.			Street Address		ddress (P	O. Box Number is Not Acceptable	)	·	-	7	
WEST PA	ALM BEACH I	L 33406				<del></del>					<b>-</b>   .
5		4			City			FL	Zip Co	nde	$\dashv$
8. The abov	e named entity	submits this statement fo	r the purpose of changing its	s renisters	ed office o	rogistoro	d agent, or both, in the State of Flor	<b>□</b>			_
the obliga	ations of registe	red agent.	to be been as a ranging in	o registere	o onice of	100letele	ic agent, or both, in the state of Flor	loa. I am t	amiliar with	n, and accept	1
CICNIATURE		7					· ·				
SIGNATURE		r printed name of registered agent a	and title if applicable. (NOT	TE: Registered	d Ageni signati	ure required w	when reinstating)	DATE			
	EILE NOVIII	FEE 10 0150 00	<u>`</u>	•				DATE			4
. ι Δ <del>tt</del> e	PILE NOW!!! or May 1, 2003	FEE IS \$150.00 Fee will be \$550.00					9. Election Campaign Fina	ncina	¢5	00 May Be	ı
Make Chec	k Payable to	Florida Department of	State				Trust Fund Contribution			oo may be ed to Fees	
10.		OFFICERS AND		11,			ADDITION IS AS A SECOND IN THE				_
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TREET ADDRESS					ADDRESS						
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indicated of the corr	ertify that the in on this report or poration or the	formation supplied with the supplemental report is to	nis filing does not qualify for ue and accurate and that m	the exemp y signatur	ption state e shall hav	d in Sections the same	on 119.07(3)(i), Florida Statutes. I funde legal effect as if made under oat	rther certify	that the in	ntormation or director	

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as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment

SIGNATURE:

565 586-3147