2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

F00000001810 DOCUMENT

1. Entity Name

R & S QUICK STOP SHOPPING INC.



Principal Place of Business Mailing Address o,uu00239 **R&S QUICK STOP SHOP R&S QUICK STOP SHOP** 5200 CLARK ROAD 5200 CLARK ROAD SARASOTA FL 34283 SARASOTA FL 34283 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 11-2746857 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name . . _ -RIDDELL, JEFFERSON F ESQ. Street Address (P.O. Box Number is Not Acceptable) 3400 S. TAMIAMI TRAIL SARASOTA FL 34239 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered egent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Delete TITLE ☐ Change ☐ Addition JAGANNATH, ROOPAN NAME 7953 MEADOW RUSH LOOP STREET ADDRESS SARASOTA FL 34238 CITY-ST-ZIP SVC Delete TITLE ☐ Change ☐ Addition Jagannath, Shanta NAME 7953 MEADOW RUSH LOOP STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34238 ☐ Delete TITLE ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP □ Delete TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE Change ☐ Addition STREET ADDRESS CHTY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

FILED Jan 06, 2003 8:00 am Secretary of State

01-06-2003 90024 011 ***158.75

10. CR2E034 (10/02) TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE 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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR