

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 29, 2003 8:00 am
Secretary of State

01-29-2003 90147 041 ***150.00

DOCUMENT # **G95842**

1. Entity Name
STRAUB'S FINE SEAFOOD, INC.



Principal Place of Business Mailing Address
~~% ROBERT A. STRAUB~~ **DONALD J CARTER** ~~% ROBERT A. STRAUB~~
512 E. ALTAMONTE DRIVE 512 E. ALTAMONTE DRIVE
ALTAMONTE SPRINGS FL 32701 ALTAMONTE SPRINGS FL 32701



2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2388248** Applied For
Not Applicable

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

STRAUB, ROBERT A.
512 E. ALTAMONTE DR.
ALTAMONTE SPRINGS FL 32701

Name **DONALD J CARTER**
Street Address (P.O. Box Number is Not Acceptable)
512 E. ALTAMONTE DR
City **ALTAMONTE SPRINGS** FL Zip Code **32701**

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 **Donald J Carter**

1/25/03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **STRAUB, ROBERT J.**
STREET ADDRESS **3792 N.E. OCEAN BLVD.**
CITY-ST-ZIP **JENSEN BEACH FL**

TITLE **P** ☐ Change ☒ Addition
NAME **DONALD J CARTER**
STREET ADDRESS **9793 LAKE GEORGIA DR.**
CITY-ST-ZIP **ORLANDO FL 32817**

TITLE **D** ☐ Delete
NAME **STRAUB, GLORIA ANN**
STREET ADDRESS **3792 N.E. OCEAN BLVD.**
CITY-ST-ZIP **JENSEN BEACH FL**

TITLE **GST** ☐ Change ☒ Addition
NAME **GARY MOLINI**
STREET ADDRESS **555 HEATHERBRITE CR**
CITY-ST-ZIP **APOPKA FL 32712**

TITLE **DP** ☒ Delete
NAME **STRAUB, ROBERT A.**
STREET ADDRESS **2250 CLASSIC COURT**
CITY-ST-ZIP **LONGWOOD FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Donald J Carter**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/03

407 831 2250

Date

Daytime Phone #

CR2E034 (10/02)