2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 07, 2002 8:00 am Secretary of State DOCUMENT # J01628 1. Entity Name STEAK HOUSE CONSTRUCTION CORPORATION 05-07-2002 90333 001 ***300.00 Principal Place of Business Mailing Address 2113 FLORIDA BLVD. 2113 FLORIDA BLVD. NEPTUNE BEACH FL 32266 NEPTUNE BEACH FL 32266 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2730457 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ALEXANDER, EDWARD B JR. Street Address (P.O. Box Number is Not Acceptable) 2113 FLORIDA BLVD **NEPTUNE BEACH FL 32233** 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 FILE NOW!!! FEE IS \$150.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 \$5.00 May Be (See criteria on back) Trust Fund Contribution. Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE R2E034 (9/01) ☐ Change ☐ Addition NAME GLEN, CEILEY F NAME STREET ADDRESS 2113 FLORIDA BLVD. STREET ADDRESS CITY-ST-ZIP **NEPTUNE BEACH FL 32266** CITY-ST-ZIP TITLE Delete TITLE Change_ - Addition -NAME ALEXANDER, EDWARD B NAME STREET ADDRESS 2113 FLORIDA BLVD. STREET ADDRESS CITY-ST-7IP NEPTUNE BEACH FL 32266 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME GARRETT, WILLIAM NAME STREET ADDRESS 2113 FLORIDA BLVD. STREET ADDRESS CITY-ST-ZIP NEPTUNE BEACH FL 32266 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IE CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 3.19.07(3)(i). Florida Statutes. Liturther 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

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

Daytime Phone #