

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2001 8:00 am
Secretary of State
 05-11-2001 90062 036 ***150.00

DOCUMENT # J59300

1. Entity Name
P. S. RESTAURANTS, INC.

Principal Place of Business
**1230 S MYRTLE AVE #101
 CLEARWATER FL 34616**

Mailing Address
**1230 S MYRTLE AVE #101
 CLEARWATER FL 34616**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2795338**

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

**GUTHRIE, J. MARVIN
 1230 S MYRTLE AVE #101
 CLEARWATER FL 34616**

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, 2001 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	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
	DP	POTENZA, JOHN V.	1530 LAKE AVENUE SOUTH CLEARWATER FL				
	V	POTENZA, MARTHA H.	1530 LAKE AVENUE SOUTH CLEARWATER FL				
	ST	POTENZA, REGINA	1530 LAKE AVENUE SOUTH CLEARWATER FL				

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

Attachment

J. MARVIN GUTHRIE, P. A.

ATTORNEY AT LAW
SUITE 101
1230 SOUTH MYRTLE AVENUE
CLEARWATER, FLORIDA 33756

J. MARVIN GUTHRIE
BOARD CERTIFIED IN TAXATION

TELEPHONE
(727) 449-1600
TELECOPIER
(727) 449-0081

649415
559300

April 27, 2001

Division of Corporations
Annual Reports Section
P. O. Box 1500
Tallahassee, Florida 32302-1500

Re: 2001 Corporation Annual Report
P. S. Restaurants, Inc.

Dear Sir or Madam:

I am enclosing the 2001 Corporation Annual Report form for the above-referenced corporation together with our check totalling \$150.00 to cover the cost of filing same.

Very truly yours

J. Marvin Guthrie

JMG:scd
Enclosure
cc: John V. Potenza