

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L02000035026

1. Entity Name

CAPTAIN JOE'S BUFFET, LLC



FILED

2003 MAR 18 PM 2:58

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

13620 Front Beach Rd.

3. Mailing Address

13620 Front Beach Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Panama City Bch, FL

City & State

Panama City Bch, FL

Zip

32407

Country

USA

Zip

32407

Country

USA

4. FEI Number

02-0658069

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Feng-Jer Ho

Street Address (P.O. Box Number is Not Acceptable)

13620 Front Beach Rd.

City

Panama City Bch

FL

Zip Code
32407

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 agent and title if applicable

DATE

FEE IS \$50.00

**Make Check Payable to Florida Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME

President /MGRM

Feng-Jer Ho

STREET ADDRESS

13620 Front Beach Rd.

CITY-ST-ZIP

Panama City Bch, FL 32407

TITLE
NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

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IN THIS SPACE**

CR2E083B (12/02)

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Feng-Jer Ho

Feng-Jer Ho

President

850-235-0770

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #