2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L72683 May 16, 2000 8:00 am Secretary of State 1. Entity Name PIER 688 RESTAURANT INC. 05-16-2000 90144 047 ***150.00 Principal Place of Business Mailing Address 3327 SW 75TH DR > ELIZABETH A. STEWART BUSHNELL FL 33513-7959 1177 S. BROAD ST. BROOKSVILLE FL 34601 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc Applied For City & State City & State 4. FEI Number 59-3007207 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent STEWART ELIZABETH A Street Address (P.O. Box Number is Not Acceptable) 33227 SW 75TH DR **BUSHNELL FL 33513** Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing **\$5.00** May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition TITLE TITLE Delete STEWART, ELIZABETH A. NAME NAME STREET ADDRESS STREET ADDRESS 3327 SW 75TH DR CITY-ST-ZIP CITY-ST-ZIF **BUSHNELL FL** ☐ Change Addition TITLE ☐ Delete STEWART, JOHN B. NAME 23327 SW 75TH DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIF **BUSHNELL FL** CITY-ST-ZIP ☐ Change ☐ Addition TITLE □ Delete NAME NAME STREET ADDRESS STRÉET ADDRESS CITY-ST-ZIF CITY-ST-ZIP Addition ☐ Change TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IE ☐ Change Addition Delete TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

SIGNATURE:

changed, or on an attachment with an

- Elizabel Steupht

352-749-520