

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2001 8:00 am
Secretary of State
 04-27-2001 90339 015 ***150.00

DOCUMENT # M77323

1. Entity Name

J.L.'S SEA GRILL, INC.

Principal Place of Business

Mailing Address

54 COREY AVENUE
P. O. BOX 66159
ST. PETERSBURG BEACH FL 33736

54 COREY AVENUE
P. O. BOX 66159
ST. PETERSBURG BEACH FL 33736

2. Principal Place of Business

3. Mailing Address

10 Corey Avenue
 Suite, Apt. #, etc.

P.O. Box 66159
 Suite, Apt. #, etc.

City & State

City & State

St. Petersburg Beach, FL

St. Petersburg Beach, FL

Zip
33736

Country
U.S.A.

Zip
33736

Country
U.S.A.

4. FEI Number **59-2893246**

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

ENGLANDER, LEONARD S
5959 CENTRAL AVE
SUITE 201
ST. PETERBURG FL 33710

Name

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

City

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 re-registering)

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 '01

TITLE	DST	☒ Delete
NAME	TAPPAN, RICHARD	
STREET ADDRESS	54 COREY AVE	
CITY-STATE-ZIP	ST PETERSBURG FL	
TITLE	DP	☐ Delete
NAME	STROSS, JOHN	
STREET ADDRESS	54 COREY AVE	
CITY-STATE-ZIP	ST PETERSBURG FL	
TITLE	George E. Lewis	☐ Delete
NAME	10 COREY AVE.	
STREET ADDRESS	ST. Pete Beach, FL 33706	
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE	President	☒ Change ☐ Addition
NAME	JOHN E. STROSS	
STREET ADDRESS	430 Park St. North	
CITY-STATE-ZIP	St. Petersburg, FL 33710	
TITLE	VICE PRESIDENT	☐ Change ☒ Addition
NAME	GEORGE E. LEWIS	
STREET ADDRESS	7619 4th Ave. S.	
CITY-STATE-ZIP	St. Petersburg, FL 33707	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

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)