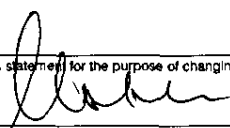
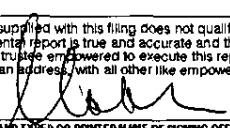


FILED
May 16, 2003 8:00 am
Secretary of State

05-16-2003 90180 008 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P0000050274			
1. Entity Name ANDRE'S STEAK HOUSE NORTH, INC.			
Principal Place of Business 18767 TAMiami TRAIL SOUTH SAN CARLOS PARK, FL 33908		Mailing Address 18767 TAMiami TRAIL SOUTH SAN CARLOS PARK, FL 33908	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 532 Whispering Pine Ln. Suite, Apt. #, etc.	
City & State Naples FL		4. FEI Number 65-1010882	
Zip 34103	Country Collier	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent COTTONONI, ANDRE 18767 TAMiami TRAIL SOUTH SAN CARLOS PARK, FL 33908		7. Name and Address of New Registered Agent Name COTTONONI, ANDRE Street Address (P.O. Box number is Not Acceptable) 532 Whispering Pine Ln. City Naples FL Zip Code 34103	
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:  DATE: 5/7/03 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when electing.)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COTTONONI, ANDRE 18767 TAMiami TRAIL SOUTH SAN CARLOS PARK, FL 33908 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Cottononi, Andre 532 Whispering Pine Ln. Naples, FL 34103 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. 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 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:  DATE: 5/7/03 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

CP21E034 (10/02)

Attachment

80119542
#P00000050274

May 8, 2003

Division of Corporations
Uniform Business Reports
P. O. Box 1500
Tallahassee, FL 32302-1500

RE: Andre's Steak House North, Inc.

Dear Sirs,

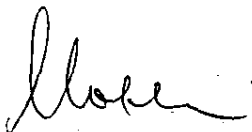
I did not receive this years Uniform Business Report Notice.

Enclosed is a check for the Report Fee of \$150.00.

Please send all future correspondence to the new mailing address:

532 Whispering Pine Lane
Naples, FL 34103

Sincerely,



Andre Cottoloni
Director, Andre's Steak House North, Inc.