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

FILED May 27, 2002 8:00 am Secretary of State

05-27-2002 90437 042 ***150.00

DOCUMENT#	P00000083219
 Entity Name 	1000000005211

MARKET RESTAURANTS, INC.

DO NOT WRITE	IN THIS SPACE
2. Principal Place of Business 6710 WINKLES ROAD	3. Mailing Address 6710 WINKLER ROAD
Suite, Apt, #, etc. # 7	Suite, Apt. #, etc.
City & State FORT MYERS, FL	City & State FORT MYERS, FL
Zip 326.0 Country	Zip 3 3 C Country

DO NOT WRITE IN THIS SPACE

	4. FEI Number	7	. / Applied For
-	4. FEI Number 65 - 106 7	21	Not Applicable
	5. Certificate of Status Desired		\$8.75 Additional Fee Required
	7. Name and Address of Current F	Register	ed Agent
vame	EMB, JEFFREY R	· · ·	
Na	- 40 C C - N N N - A - A - A - A - A - A -		

DO NOT WRITE IN THIS SPACE

Name LAMB, JEFFRE	1 R	
Street Address (P.O. Box Number is Not Ac	ceptable)	

INLAN AVENUE N.

000	10017	AVDIVIC	
City	NAPL	ES .	FL

or the purpose of changing its registered office or registered agent, or both, in the State of Florida. JEFFREY R. LAMB SIGNATURE Signature, typed or printed name of registered agent and title if applicable

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

January 1: May 1: Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25

- 10. Election Campaign Financing Trust Fund Contribution.
- \$5.00 May Be

(See criteria on back) Make Check Payable	to Department of State
11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS 6131 Tidewater Island Circle CITY-ST-ZIP Fort Myers FL. 33908	TITLE \ NAME STREET ADDRESS CITY-ST-ZIP
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TITLE NAME STREET ADDRESS CITY-SI-ZIP	TITLE* NAME STREET ADDRESS GITY: ST-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 on an attachment with an address, with all other like empowered.

Sonald Patak 4/30/02 239-4543444