

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# - P01000013707

1. Entity Name

Grocery & Beverage, Inc.

FILED

02 APR -5 AM 10:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

290 Quail Drive

Merritt Island, Fl. 32952

Mailing Address

290 Quail Drive

Merritt Island, Fl. 32952

2. Principal Place of Business

1748 Southland Ave.

3. Mailing Address

514 Lincoln Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Melbourne, Fl.

City & State

Cocoa, Fl.

4. FEI Number

59-3722890

Applied For

Not Applicable

Zip

Country

32935

USA

Zip

Country

32922

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Lovett, Antonio

290 Quail Drive

Merritt Island, Fl. 32952

7. Name and Address of New Registered Agent

Name

Sheffield, Netonya L.

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

514 Lincoln Road

City

Cocoa

FL

Zip Code
32922

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

Netonya L. Sheffield

Netonya L. Sheffield

3/29/02

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

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

TITLE P/D ☒ Delete
NAME Lovett, Antonio
STREET ADDRESS 290 Quail Drive
CITY-ST-ZIP Merritt Island, Fl. 32952

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P/D ☐ Change ☒ Addition
NAME Sheffield, Netonya L.
STREET ADDRESS 514 Lincoln Road
CITY-ST-ZIP Cocoa, Fl. 32922

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-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 of 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:

Netonya L. Sheffield
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Netonya L. Sheffield

President

3/29/02

321-635-9161

Day

Daytime Phone #

CR2E034 (11/00)