## **2003 FOR PROFIT CORPORATION**

## **UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT #** 

PE.

OCUMENT # F	P01000053240	
TE & SHORTY'S OF TAI	MPA, INC.	
cipal Place of Business	Mailing Address	·



## Apr 21 Secre

04-21-2003 90346 045 \*\*\*150.00

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, 2003 8:00 am	
tary of State	
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					E Trist							
Principal Place of Business 26133 US HWY. 19 N., STE. 100 CLEARWATER FL 33763-2019		26133	Mailing Address 26133 US HWY. 19 N., STE. 100 CLEARWATER FL 33763-2019									
2. Principal Place of Business		3. Mai	3. Mailing Address								1011 BBIT 1881	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES						
City & State		City & State				<b>4.</b> FI	. FEI Number 59-3725265 Applied For Not Applied					
Zip	Country	Zip		Country		<b>5.</b> C	ertificate of Status D	esired [		.75 Add	litional	
	6. Name and Address of Current	Registere	d Agent			7. N	ame and Address o	1 New Regist	ered Age	nt		
				Name								
KIEFER, NEIL G 26133 US HWY. 19 N., STE. 100			Street A	Street Address (P.O. Box Number is Not Acceptable)								
	TER FL 33763-2019								-			
<b>V</b>		•		City					FL	Zip Code	•	
	named entity submits this statement folions of registered agent.	r the purp	ose of changing its re	egistered office o	registere	d age	ent, or both, in the Sta	ate of Florida.	I am fami	liar with,	and accept	
CIONATURE											l	
SIGNATURE .	Signature, typed or printed name of registered agent	and title if app	licable. (NOTE:	Registered Agent signat	ure required w	when rein	nstating)		DATE			
Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department o	State					9. Election Camp Trust Fund Co	_	ng 🔲		O May Be to Fees	
10. ,	OFFICERS AND	DIRECTO		11.		ADE	DITIONS/CHANGES	TO OFFICER	S AND DI	RECTORS	IN 11	
TITLE • NAME STREET ADDRESS CITY-ST-ZIP	PD USILTON, LEE 136 MIDWAY ISLAND CLEARWATER FL 33767	•	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP						Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Johnson, Dennis 277 Aberdeen St. Dunedin Fl 34698		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP						Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DROSTE, EDWARD C 20 MIDWAY ISLAND CLEARWATER FL 33767		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP						Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CLARK, BRUCE W 2125 PINNACLE CIRCLE S PALM HARBOR FL 34684		☐ 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	7296	Br	Neil G. yce Point s Park, FL	33782		Change	X Addition	
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 supplied ental 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 of trustife in powered to execute this report as required by Chapter 607, 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:

RE RECLE Usilton, Pres

2/20/03

Date

(727) 725-2551

Daytime Phone #