

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90193 022 ***150.00

DOCUMENT # P01000092320

1. Entity Name
DOUGHBOY PIZZA, III, INC.



Principal Place of Business
**3650 PALM BEACH BLVD.
FORT MYERS, FL 33916**

Mailing Address
**3650 PALM BEACH BLVD.
FORT MYERS, FL 33916**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
24532 SAILFISH STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
BONITA SPRINGS, FL

City & State
BONITA SPRINGS, FL

4. FEI Number
65-1138978

Applied For
☐ Not Applicable

Zip Country
34134 USA

Zip Country
34134 USA

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

**PATRAS-VENETIS, JOANNE
3650 PALM BEACH BLVD.
FORT MYERS, FL 33916**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

TITLE **D** ☐ Delete
NAME **PATRAS-VENETIS, JOANNE**
STREET ADDRESS **3650 PALM BEACH BLVD.**
CITY-ST-ZIP **FORT MYERS, FL 33916**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D P S T** ☒ Change ☐ Addition
NAME **PATRAS-VENETIS, JOANNE**
STREET ADDRESS **24532 SAILFISH STREET**
CITY-ST-ZIP **BONITA SPRINGS, FL 34134**

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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 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: **JOANNE PATRAS-VENETIS, PRES.** 4/28/03 (239) 936-1900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)