

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Feb 10, 2005 08:00 AM
Secretary of State**

DOCUMENT # P02000118768

1. Entity Name
R AND T SMOKEHOUSE PIT BARBECUE, INC.



Principal Place of Business
**33626 DOLORES COURT
LEESBURG, FL 34788**

Mailing Address
**33626 DOLORES COURT
LEESBURG, FL 34788**



02012005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 03-0493172	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**MCDONALD, STEPHEN J
315 SE 7TH STREET SUITE 303
FORT LAUDERDALE, FL 34788**

**DO NOT WRITE
IN THIS SPACE**

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, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

UN0000223373
02/10/05-80040-014 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PETERKIN, TESSA L 33626 DOLORES COURT LEESBURG, FL 34788
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PETERKIN, ROGER LEE SR 33626 DOLORES COURT LEESBURG, FL 34788
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**DO NOT WRITE
IN THIS SPACE**

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:

Tessa L Peterkin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/05
Date

352-78-2330
Daytime Phone #