## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## P95000048540 **DOCUMENT #**

1. Entity Name

STEAK IN FOODS & BEVERAGES INC.



## **FILED** Feb 12, 2003 8:00 am Secretary of State 02-12-2003 90120 046 \*\*\*150.00

					-	W. In						
Principal Place 801 S. BAYSH BOX 16 MIAMI FL 3313	ore drive	S	801 S BOX	Mailing Address 801 S. BAYSHORE DRIVE BOX 16 : MIAMI FL 33131								
2. Principal Place of Business 3. Mailing Address								i idaliaati kid idaat aliili dalke abilk aa	111 <b>20</b> 111 010	91 1819: Billi B	1911 6911 1961	
Suite, Apt. #	#, etc.		Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES				
City & State	!		City & State				4. 1	4. FEI Number. 65-0613024 Applied For Not Applicate				
Zip Country			Zip Cour			itry	5. Certificate of Status Desired   \$8.75 Additional Fee Required					
	C Nome	and Address of Current	Pogietere	d Agent			. 7. 1	Name and Address of New Regis	tered Aç	ent.		
	o. warne	and Address of Correst	negiatera	a Agent		Name						
MARTIN, MIGUEL A 801 S. BAYSHORE DRIVE						Street Address (P.O. Box Number is Not Acceptable)						
SUITE 830												
MIAMI FL 33131						City			FL	Zip Code	9	
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8. The above the obligati	named entit ons of regist	y submits this statement for tered agent.	or the purp	ose of changing its	register	ed office or regisi	tered ag	gent, or both, in the State of Florida	. ганта	Tilliat With, e	and accept	
SIGNATURE _	Signature, typed	or printed name of registered agent	and title if app	ilicable. (NOTi	E: Registere	ed Agent signature requ	ired when r	reinstating)	DATE	<u> </u>		
After	May 1, 200	!! FEE IS \$150.00 03 Fee will be \$550.00 o Florida Department o	of State					Election Campaign Financ Trust Fund Contribution.	ing 🗆		May Be I to Fees	
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10 Lhoroby	cortify that th	on information supplied wi	th this filing	a does not qualify for	or the ex	emption stated in	Section	n 119.07(3)(i), Florida Statutes. I fu	rther cert	ity that the i	ntormation ]	

indicated on this report or supplied with this tiling does not quality 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:

INCE REQUIRED SIGNA SIGNATURE AND TYPES OR PRINTED

Date

Daytime Phone #