

2004 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P95000081036**

1. Entity Name

REMINGTON'S STEAKHOUSE, INC.

03-25-2002 90154 033 ***150.00
04 JAN 30 PM 4:48

Principal Place of Business

**2836 E BEARSS AVE
TAMPA FL 33613
US**

Mailing Address

**2836 E BEARSS AVE
TAMPA FL 33613
US**

REINSTATEMENT 03-04



2. Principal Place of Business

3. Mailing Address

1212 Oxbridge Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Lutz FL

Zip Country

Zip Country

33549

4. FEI Number

59-3344008

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SROUR, ABRAHAM
2836 E BEARSS AVE
TAMPA FL 33613**

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.

SIGNATURE

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, 2002 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	<input type="checkbox"/> Delete
NAME	SROUR, ABRAHAM	
STREET ADDRESS	2836 E BEARSS AVE	
CITY-ST-ZIP	TAMPA FL 33613	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addit
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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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

[Handwritten Signature]

01/12/04 267-9566

January 12, 2004

From: Remington's Steakhouse, Inc
Abraham Srour - President

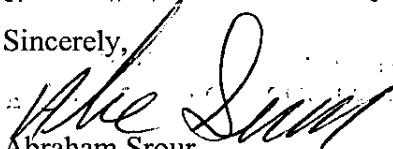
To: Florida Department of Revenue
Division of Corporations
2003 Uniform Business Report

Dear Sir / Mrs.,

The mailing address shown on the UBR form has been changed to read – 1212 Oxbridge Dr. Lutz FL 33549. Due to the address change, it might have been the reason I have not received the 2003 UBR form. That's why the corporation was dissolved due to improper mailing address. Therefore I would like to ask you to waive any penalty imposed. Thus please accept the enclosed check for \$150.00 representing the annual fee for the 2003 Uniform Business Report.

Thank you for your understanding and cooperation. If additional information is needed, please do not hesitate to write or call.

Sincerely,


Abraham Srour
President