

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90161 012 ***150.00

DOCUMENT # P95000087352

1. Entity Name
THE BARKING SHARK GRILL & BEACH BAR, INC.



Principal Place of Business
**1154 ESTERO BOULEVARD
FORT MYERS BEACH FL 33931**

Mailing Address
**602 S.E. 21ST LANE
CAPE CORAL FL 33990**



2. Principal Place of Business

3. Mailing Address

1154 ESTERO BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

7.M.B. FL

4. FEI Number **65-0614916**

Applied For

Not Applicable

Zip

Country

33931

Country

See

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

**ADAMS, MILA P
602 S.E. 21ST LANE
CAPE CORAL FL 33990**

Name

William P. Keith III

Street Address (P.O. Box Numbers Not Acceptable)

1154 ESTERO BLVD

City

7.M.B.

FL

Zip Code

33931

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

William P. Keith III
Signature, typed or printed name of registered agent and not applicable.

William P. Keith III
(NOTE: Registered Agent signature required when reinstating)

DATE

4/25/03

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PTD** ☒ Delete
NAME **ADAMS, MILA P**
STREET ADDRESS **602 S.E. 21ST LANE**
CITY-ST-ZIP **CAPE CORAL FL 33990**

TITLE **PO** ☐ Change ☐ Addition
NAME **William P. Keith III**
STREET ADDRESS **1154 Estero Blvd**
CITY-ST-ZIP **7.M.B. FL 33931**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME **Evelyn Page**
STREET ADDRESS **1154 ESTERO BLVD.**
CITY-ST-ZIP **7.M.B. FL 33931**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William P. Keith III

Date

Daytime Phone #

4/25/03 822-7465

CR2E034 (10/02)