

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 21, 2001 8:00 am
Secretary of State

08-21-2001 90029 006 ***550.00

0124440 AT

DOCUMENT # P96000033959

1. Entity Name
ESTERO SEA FOOD CO.

Principal Place of Business
~~2200 MAIN ST.~~ **23278 Marsh Landing Blvd**
ESTERO FL 33928
 FORT MYERS FL 33931

Mailing Address
 P.O. BOX 931
 ESTERO FL 33928



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 65-0660205		Applied For <input type="checkbox"/> Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
JACOBSEN, SIDNEY 2200 MAIN ST. FORT MYERS FL 33931 23278 Marsh Landing Blvd ESTERO FL 33928		SIDNEY J. JACOBSEN Street Address (P.O. Box Number is Not Acceptable) 23278 Marsh Landing Blvd ESTERO FLA City FL Zip Code 33928	

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 *Sidney Jacobson* **SIDNEY JACOBSEN** 8/15/01
(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. ☐ **FILE NOW!!! FEE IS \$550.00**
After September 12, 2001 Fee will be \$750.00
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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JACOBSEN, SIDNEY 2200 MAIN ST. FORT MYERS FL 33931	TITLE NAME STREET ADDRESS CITY-ST-ZIP	JACOBSEN, SIDNEY 23278 Marsh Landing Blvd ESTERO FL 33928
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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 *Sidney Jacobson* **8-15-01 941 463-6166**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/01)