## 2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT #.. P96000069766 Secretary of State

1. Entity Name 05-15-2002 90077 023 \*\*\*150.00 T.J.'S GERMAN & AMERICAN SANDWICH SHOP, INC. Principal Place of Business Mailing Address 2929 PALM BEACH BLVD. 2929 PALM BEACH BLVD. FORT MYERS FL 33916 FORT MYERS FL 33916 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0691145 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \_\_\_\_ 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MILES, PETER Street Address (P.O. Box Number is Not Acceptable) 2929 PALM BEACH BLVD. FORT MYERS FL 33916 City Zip Code FL 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550,00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Detete TITLE ☐ Change ☐ Addition CR2E034 (9/01) MILES, CHRISTINE NAME NAME STREET ADDRESS 2929 PALM BEACH BLVD STREET ADDRESS CITY-ST-ZIP FT MYERS FL CITY-ST-ZIP TITLE VD ☐ Delete TITLE ☐ Addition MILES, PETER = NAME STREET ADDRESS 1507 WEST CAPE CORAL PKWY #1 STREET ADDRESS CITY-ST-7IP CAPE CORAL FL 33914 CITY-ST-7IP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

☐ Delete

TITLE

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STREET ADDRESS CITY-ST-ZIP ☐ Change

\*\*\* Chattage I further certify that the information

☐ Addition

TITLE

NAME

STREET ADDRESS