

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2002 8:00 am
Secretary of State

05-10-2002 90034 008 ***150.00

DOCUMENT # P97000092927

1. Entity Name

NEW HMS STEAKHOUSE OF CLEARWATER, INC.

Principal Place of Business

**2109 U.S. HIGHWAY 19, NORTH
 CLEARWATER FL 34624**

Mailing Address

**4744 N DALE MABRY
 TAMPA FL 33614
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3493226

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**SELTZER, HAROLD J
 4744 N DALE MABRY
 TAMPA FL 33614**

7. Name and Address of New Registered Agent

Name **Holliday, Ronald Esq**
 Street Address (P.O. Box Number is Not Acceptable)
Piper Rudnick LLP
101 E KENNEDY BLVD, SUITE 2000
 City **Tampa** FL Zip Code **33602-5149**

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 | D | <input type="checkbox"/> Delete |
| NAME | SELTZER, HAROLD J | |
| STREET ADDRESS | 4744 NORTH DALE MABRY | |
| CITY-ST-ZIP | TAMPA FL 33614 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | SELTZER, MICHAEL | |
| STREET ADDRESS | 4744 N DALE MABRY | |
| CITY-ST-ZIP | TAMPA FL 33614 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|---------------------------------|--|
| TITLE | P.D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | SELTZER, HAROLD | |
| STREET ADDRESS | 4806 CULBREATH ISLES WAY | |
| CITY-ST-ZIP | Tampa FL 33629 | |
| TITLE | C.D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | SELTZER, MICHAEL | |
| STREET ADDRESS | 4744 N. DALE MABRY | |
| CITY-ST-ZIP | Tampa FL 33614 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| 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 information.

SIGNATURE:  **Michael Seltzer**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/19/02

Date

813-873-7267

Daytime Phone #

CR2E034 (9/01)