

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

8000021364

1. Entity Name

P 9800021364

FISHMONGER RESTAURANT OF FT. MYERS BEACH, INC.

FILED

May 23, 2001 8:00 am
Secretary of State

05-23-2001 91178 046 ***150.00

A0071505

Principal Place of Business

212 IBIS STREET
FORT MYERS BEACH, FL 33931

Mailing Address

212 IBIS STREET
FORT MYERS BEACH, FL 33931

2. Principal Place of Business

938 PRESCOTT STREET

Suite, Apt. #, etc.

3. Mailing Address

938 PRESCOTT STREET

Suite, Apt. #, etc.

City & State

FORT MYERS BEACH, FL

City & State

FORT MYERS BEACH, FL

Zip
33931Zip
33931

Country

4. FEI Number

65-0154879

Applied For

Not Applicable

6. Name and Address of Current Registered Agent

RULAND, NICHOLAS
212 IBIS STREET
FORT MYERS BEACH, FL 33931

7. Name and Address of New Registered Agent

Name RULAND, NICHOLAS

Street Address (P.O. Box Number is Not Acceptable)

9338 PRESCOTT STREET

City

FORT MYERS BEACH

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.

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!
After MAY 1, 2011 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. \$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE DP Delete
NAME RULAND, NICHOLAS
STREET ADDRESS 212 IBIS STREET
CITY-ST-ZIP FORT MYERS BEACH, FL 33931

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP Change Addition
NAME RULAND, NICHOLAS
STREET ADDRESS 93 PRESCOTT STREET
CITY-ST-ZIP FORT MYERS BEACH, FL 33931TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE Change 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 empowered.

SIGNATURE:

Nicholas Ruland

NICHOLAS RULAND

941-765-0440

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)