

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000089943

1. Entity Name

GOURMET ENTREES TO GO OF DESTIN, INC.

FILED
Apr 28, 2001 8:00 am
Secretary of State

04-28-2001 90087 016 ***150.00

C0053735



DO NOT WRITE IN THIS SPACE

Principal Place of Business

214 DOLPHIN ESTATES CT
DESTIN FL 32541

Mailing Address

214 DOLPHIN ESTATES CT
DESTIN FL 32541

2. Principal Place of Business

837 HWY 98 EAST

3. Mailing Address

Suite, Apt. #, etc.

City & State

DESTIN, FLORIDA

City & State

4. FEI Number 59-3552437

Applied For

Not Applicable

Zip

32541

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ADAIR, KEVIN
214 DOLPHIN ESTATES CT
DESTIN FL 32541

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

KEVIN ADAIR PRESIDENT 4/23/2001

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, 2001 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 P
NAME ADAIR, KEVIN ☐ Delete
STREET ADDRESS 214 DOLPHIN EST. COURT
CITY-ST-ZIP DESTIN FL 32541

TITLE VP
NAME GOBIN, GARY ☐ Delete
STREET ADDRESS 51 N.W. SELLERS PLACE
CITY-ST-ZIP FORT WATON BEACH FL 32548

TITLE T
NAME GOBIN, CHARLOTTE ☐ Delete
STREET ADDRESS 61 N.W. SELLERS PLACE
CITY-ST-ZIP FORT WALTON BEACH FL 32548

TITLE S
NAME ADIAR, LORI ☐ Delete
STREET ADDRESS 214 DOLPHIN EST. COURT
CITY-ST-ZIP DESTIN FL 32541

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☒ Change ☐ Addition
STREET ADDRESS 708 LEGION DR #5
CITY-ST-ZIP DESTIN, FL. 32541

TITLE
NAME ☒ Change ☐ Addition
STREET ADDRESS 708 LEGION DR #5
CITY-ST-ZIP DESTIN, FL. 32541

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT
KEVIN ADAIR 4/23/2001 850
837-3568

Date

Daytime Phone #

CR2E034 (10/00)