2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P99000076749 Sep 05, 2000 8:00 am Secretary of State R & S OF THE GULFCOAST, INC. 09-05-2000 90024 005 ***150.00 Principal Place of Business Mailing Address 2220 SIESTA DRIVE 2220 SIESTA DRIVE SARASOTA FL 34239 SARASOTA FL 34239 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State Applied For 4. FEI Number Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name VOIGT, STEPHEN F Street Address (P.O. Box Number is Not Acceptable) 2414 BEE RIDGE RD. SARASOTA FL 34239-. 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. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. rregoeut Change . Addition TITLE □ Delete TITLE NAME NAME Drive STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ 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 Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling 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 in powered.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #







Business & workers' compensation insurance

Retirement & investment planning

Employee health insurance
Business valuation services

Surety & performance bonds

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Century Small Business Solutions

4301 32nd Street West, Suite A20 Bradenton, FL 34205 Phone: (941) 755-3332 Fax: (941) 755-3334

E-Mail: gsn@centurysmallbiz.com

August 29, 2000

Uniform Business Report Division of Corporations: P.O. Box 1500 Tallahassee, FL 32302-1500 RE: P99000076749

Enclosed please find a check to Department of State for \$150.00 from R&S of the Gulfcoast, Inc d/b/a Bella Pizzeria Document # 99000076749.

This check is a replacement to the one mailed on April 1, 2000 which apparently was never received by your office as the check has not yet cleared the bank. In speaking with a representative from the Division of Corporations it was discovered that the address for R&S of the Gulfcoast, Inc. was incorrect on your records which may lead to the misplacement of the original timely annual payment.

With this, I am requesting acceptance of the 2000 annual fee and waiver of the \$400.00 penalty.

Your consideration is appreciated.

Sincerely,

George W: Najr Accountant