**FILED** 

04-21-2003 90497 047 \*\*\*150.00

(239) 995- 7822

## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT #**

P99000090374

Mailing Address

1. Entity Name

NAPLES BEEF'S, INC.

Principal Place of Business

SIGNATURE:

4085 HANCOCK BRIDGE PARKWAY 108 NORTH FT. MYERS FL 33903 US				4085 HANCOCK BRIDGE PARKWAY 108 NORTH FT. MYERS FL 33903 US						
2. Principal Place of Business			3. Mailing Address					T 1804/1804 THE LIGHTS STATE OR HE WERE BRINE BRINE BRINE OF THE CITYLE CONTROL WHAT CORE		
Suite, Apt. #, etc.			Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES		
City & State				City & State			4.	FEI Number 65-1012024 Applied For Not Applicable		
Zip Country			Zip Cour			A A . A	5. Certificate of Status Desired \$8.75 Additional Fee Required			
6. Name and Address of Current R				egistered Agent			7. Name and Address of New Registered Agent			
MARTINEZ, JOHN A 11100 HARBOUR YACHT CT. 44 D							Name  MARTINEZ JOHN  Street Address (P.O. Box Number is Not Acceptable)  1717 HAVERMILL CT.			
FT. MYERS FL 33908					-	City NAPLES FL Zip Code 34104				
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. I am familiar with, and accept the obligations of registered agent.										
SIGNATURE										
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees		
10.		OFFICERS AND	DIRECTO	RS	11.		А	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
STREET ADDRESS	D Martinez, 107 Hicko Brandon	ry creek boulevar	D .	☐ Delete	TITLE NAME STREET A CITY-ST-			☐ Change ☐ Addition		
STREET ADDRESS	SD Martinez, 7717 Have Naples Fl		• ພາຍ	☐ Delete	TITLE NAME STREET A CITY-ST-		فجعد سجد	☐ Change ☐ Addition		
	PD BENNETT, 11260 JAC FT. MYERS	NA CT 2007		☐ Delete	TITLE NAME STREET A CITY-ST-			☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				, □ Delete	TITLE NAME STREET A CITY-ST-			☐ Change ☐ Addition		
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP				☐ Delete	TITLE NAME STREET A CITY-ST-	l l		☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET AI CITY-ST-			☐ Change ☐ Addition		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.