

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90192 033 ***150.00

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DOCUMENT # P99000099190

1. Entity Name
MEDITERRANEAN SEA GRILL, INC.



1

Principal Place of Business
**521 ATHENS ST.
TARPON SPRINGS FL 34689**

Mailing Address
**521 ATHENS ST.
TARPON SPRINGS FL 34689**



2. Principal Place of Business

**512 Dodecanese Blvd.
Tarpon Springs, Fla.**

3. Mailing Address

**521 Athens Street
Tarpon Springs, Fla.**

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3609690**

Applied For
Not Applicable

Zip **34689**

Country **U.S.A.**

Zip **34689**

Country **U.S.A.**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**KITSOS, NAOMI
521 ATHENS ST.
TARPON SPRINGS FL 34689**

7. Name and Address of New Registered Agent

Name **NAOMI KITSOS**
Street Address (P.O. Box Number is Not Acceptable) **521 Athens Street**
City **Tarpon Springs** FL Zip Code **34689**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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 Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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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.

SIGNATURE:

NAOMI KITSOS 4-29-03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)