

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Sep 18, 2001 8:00 am**  
**Secretary of State**

08-22-2001 90220 027 \*\*\*150.00  
 09-18-2001 90081 049 \*\*\*400.00

**DOCUMENT # P99000107546**

1. Entity Name  
**DEMARCO'S RESTAURANT, INC.**

Principal Place of Business 3131 CLARK RD #103 SARASOTA FL 34231	Mailing Address 3131 CLARK RD #103 SARASOTA FL 34231
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2. Principal Place of Business 3131 CLARK RD. Suite, Apt. #, etc. # 103	3. Mailing Address 3131 CLARK RD. Suite, Apt. #, etc. # 103
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City & State SARASOTA FL	City & State SARASOTA FL	4. FEI Number 31-1682015	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip 34231	Country USA	Zip 34231	Country USA



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent  
**STEPHEN F. VOIGT, P.A.**  
 2414 BEE RIDGE RD.  
 SARASOTA FL 34239  
*current*

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P DEMARK, CHERE 7236 N SERENOA DR SARASOTA FL 34241</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V VELKOS, TOM 7236 N SERENOA DR SARASOTA FL 34241</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CR2E034 (10/00)

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: *CHERE DEMARCO* Date: *3-16-01* Daytime Phone #: *941-925-0226*