FILED

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 365060 1. Entity Name SEMORAN PIZZA HUTS, INC.					Feb 05, 2002 8:00 am Secretary of State 02-05-2002 90144 036 ***150.00			
Principal Place of Business 14841 DALLAS PKWY DALLAS TX 75240-2100 US		Mailing Address 14841 DALLAS PKWY DALLAS TX 75240-2100 US				1581 3 881 38 81 38 01 3		
	Place of Business allas Parkway #, etc.	3. Mailing Address 14841 Dallas Parkway Suite, Apt. #, etc. 3S137			DO NOT WRITE IN THIS SPACE			
City & Stat		City & State Dallas, TX		4.	. FEI Number Applied For Not Applicable			
Zip 75254-7		75254-7552 U	Country	· ·	Certificate of S		\$8.75 Add Fee Require	
6. Name and Address of Current Registered Agent Name					Name and Add	iress of New Registe	red Agent	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD				Street Address (P.O. Box Number is Not Acceptable)				
PLANTATION FL 33324			City	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								
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) Signature, typed or printed name of registered agent and title if applicable. (NOTE: Reg FILE NOW!!! F After May 1, 2002 F Make Check Payable to			EE IS \$150.0 ee will be \$5	be \$550.00 Trust Fund Contribution.			cing \$5.00 May Be Added to Fees	
11.	OFFICERS AND D	IRECTORS	12.	A	DDITIONS/CHA	NGES TO OFFICERS		S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MURPHY, JOHN J 514841 DALLAS PKWY DALLAS TX 75240	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		CODE ONL	Y CHANGE** 254-7552	χ ζ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD MORGAN, MELANIE K 14841 DALLAS PKWY DALLAS TX 75240	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Dallas	, TX 752	254-7552	X X ☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTÁS Horn, ida W 14841 dallas parkway Dallas TX 75240-2100	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Dallas	, TX 752	54-7552	X X ☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
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:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Murphy, President

972/338-7700 Daytime Phone #