Sent By:; 0000000000; Aug

08-25-2004 90003 006 ****61.25
P04000004519

AMENDED

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
04 AUG 31 AM 10: 28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

54069845

DOCUMENT # P04000004519

1. Entity Name
Euro Bread & Cafe of Las Olas, Inc.

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
501 SE 2nd Streeet	501 SE 2nd Streeet
Suite, Apt. #, etc. Summit Las Olas	Suite, Apt. #, etc. Summit Las Olas
City & State Ft. Lauderdale	City & State Ft. Lauderdale
Zip 33301 Country US	Zip 33301 Country US

4. FEI Number ☑ Applied For ☐ Not Applicable

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

7. Name and Address of Current Registered Agent

Name James Young

Street Address (P.O. Box Number is Not Acceptable)
3020 NE 2nd Ave., PH#1

City Ft. Lauderdale FL Zip Code 33308

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 James Young (Signature of registered agent if applicable) 08/18/2004 DATE

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	Anne Marie Chouard
STREET ADDRESS	3020 NE 32nd Ave., PH #1
CITY-ST-ZIP	Ft. Lauderdale, Florida 33308
TITLE	VP
NAME	James Young
STREET ADDRESS	3020 NE 32nd Ave., PH #1
CITY-ST-ZIP	Ft. Lauderdale, Florida 33308
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

8/18/31

CR2E034B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: James Young James Young 08/18/2004 954-224-8193
SIGNATURE AND TYPED OR PRINTED NAME OF MEMBER OFFICER OR DIRECTOR — Date — Daytime Phone #