2002 UNIFORM BUSINESS REPORT (UBR)

2002	UNIFORM BUSII	NESS REPO	RT	(UBR	<u> </u>	FIL		n am	
DOCUMENT # 596615						Jan 23, 2002 8:00 am Secretary of State			
1. Entity Name CHEFS: INTERNATIONAL-PALM BEACH, INC.						01-23-2002 90077 028 ***150.00			
Principal Place 62 BROADWA PO BOX 1332 POINT PLEAS US	Υ	Mailing Address 62 BROADWAY PO BOX 1332 POINT PLEASANT BEACH NJ 08742							
Principal Place of Business 3. Mailing Address				-") 100401 gilim indin anda altal ilaal min m	MIT MINIT BINIT DINSI	E1631 01831 1001	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & State	9	City & State	City & State			4. FEI Number 22-2239649 Applied For Not Applicable			
Zip Country		Zip Country		try		5. Certificate of Status Desired	\$8.75 Ad	Iditional	
6. Name and Address of Current Registered Agent						7. Name and Address of New Register			
B. T. COOKSEY 979 BEACHLAND BOULEVARD				Name Street Address (P.O. Box Number is Not Acceptable)					
VERO BEACH FL 32963				City			_ ■ Zip Coo	de	
	named entity submits this statement for t						EL Zip Cod		
Tax filing	Signature, typed or printed name of registered agent and pration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW! After May 1, 200 Make Check Payab	!! FEE 02 Fee	will be \$5	00 50.00	10. Election Campaign Financing Trust Fund Contribution.		00 May Be	
11. ×	OFFICERS AND D	RECTORS	12.			ADDITIONS/CHANGES TO OFFICERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Fletcher, Martin W. 62 Broadway Pt Pleasant Beach NJ	□ Delete					∐ Change	- 🗌 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLETCHER, JAMES E. 2980 S.E. FALMOUTH DR STUART FL	□ velete	ŢITLI NAM			•	☐ Change	☐ Addition . d	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. PAPALIA, ANTHONY C. 813 W.LAUREL AVENUE PT PLEASANT BEACH NJ	- Delete		dele	ted Jan	e fourth year we have nes Fletcher from Please note deletion.	Change	Addition	
TITLE NAME STREET ADDRESS	THE BOATTO	☐ Delete					Change	☐ Addition	
TITLE NAME STREET ADDRESS		☐ Delete	-				Change	Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ Delete					☐ Change	Addition	
indicated	certify that the information supplied with to don this report or supplemental report is to reporation or the receiver or trustee empore, or on an attachment with an address, w	rue and accurate and that r	ny signa :as regu	tura chall h	ave the sa apter 607,	me legal effect as if made under oath; the Florida Statutes; and that my name appe	at Lam an office	information er or director or Block 12 if	

SIGNATURE:

MACHINE REQUIRED Martin W. Fletcher SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 7, 2002 732-295-0350

Date Daytime Phone #