

# 2001 UNIFORM BUSINESS REPORT (UBR)

0019763 AF

DOCUMENT # **A96000000176**

1. Entity Name

KOO KOO ROO FLORIDA 104J LTD.

FILED

01 APR 16 PM 12:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*WJ*

Principal Place of Business  
10800 BISCAYNE BOULEVARD-PENTHOUSE  
MIAMI FL 33161

Mailing Address  
2701 ALTON PARKWAY  
ATTN: TAX DEPT  
IRVINE CA 92606



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
2701 Alton Parkway  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State  
Irvine, CA

City & State

4. FEI Number **65-0640664**

Applied For  
Not Applicable

Zip  
92606-5149

Country  
USA

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. Capital Contributions as Shown on record. **\$10,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **\$10,000.00**

11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
**NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # **L96000000099**  
NAME **R.A.C. 104J L.C.**  
STREET ADDRESS **10800 BISCAYNE BOULEVARD-PENTHOUSE**  
CITY-ST-ZIP **MIAMI FL 33161**

STREET ADDRESS **2701 Alton Parkway**  
CITY-ST-ZIP **Irvine, CA 92606-5149**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS  
CITY-ST-ZIP **700004080887--8**  
**04/28/01--01067--012**  
**\*\*\*\*158.75 \*\*\*\*158.75**

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14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: *Robert T. Trebing, Jr.* **Robert T. Trebing, Jr.** **4/4/01** **949/757-7900**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (11/00)