

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90121 026 ***150.00

DOCUMENT # F02000000688

1. Entity Name
WOLFGANG PUCK WORLDWIDE, INC.



Principal Place of Business
**100 CRESCENT DRIVE, SUITE 100
 BEVERLY HILLS, CA 90210**

Mailing Address
**100 CRESCENT DRIVE, SUITE 100
 BEVERLY HILLS, CA 90210**

14010000



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04222004 Chg-P CR2E034 (10/03)

City & State

City & State

4. FEI Number
95-4809367

Applied For
 Not Applicable

Zip

Country

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

**PARACORP INCORPORATED
 236 EAST 6TH AVENUE
 TALLAHASSEE, FL 32303**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PSTD** Delete
 NAME **KAUTZ, ROB**
 STREET ADDRESS **100 CRESCENT DRIVE, SUITE 100**
 CITY-ST-ZIP **BEVERLY HILLS, CA 90210**

TITLE **PSTD** Change Addition
 NAME **KAUTZ, ROB**
 STREET ADDRESS **- same -**
 CITY-ST-ZIP **- same -**

TITLE **CD** Delete
 NAME **PUCK, WOLFGANG**
 STREET ADDRESS **100 CRESCENT DRIVE, SUITE 100**
 CITY-ST-ZIP **BEVERLY HILLS, CA 90210**

TITLE **CD/CEO** Change Addition
 NAME **Puck, Wolfgang**
 STREET ADDRESS **- same -**
 CITY-ST-ZIP **- same -**

TITLE **D** Delete
 NAME **RABIN, STUART J**
 STREET ADDRESS **100 CRESCENT DRIVE, SUITE 100**
 CITY-ST-ZIP **BEVERLY HILLS, CA 90210**

TITLE **Assistant Secretary** Change Addition
 NAME **Takahashi, Larry**
 STREET ADDRESS **100 N. Crescent Dr. #100**
 CITY-ST-ZIP **Beverly Hills, CA 90210**

TITLE **D** Delete
 NAME **SCULLEY, DAVID**
 STREET ADDRESS **100 CRESCENT DRIVE, SUITE 100**
 CITY-ST-ZIP **BEVERLY HILLS, CA 90210**

TITLE **Assistant Secretary** Change Addition
 NAME **Potter, Julia**
 STREET ADDRESS **100 N. Crescent Dr. #100**
 CITY-ST-ZIP **Beverly Hills, CA 90210**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **T** Change Addition
 NAME **Stigall, James**
 STREET ADDRESS **100 N. Crescent Dr. #100**
 CITY-ST-ZIP **Beverly Hills, CA 90210**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Change Addition
 NAME **CHU, David**
 STREET ADDRESS **100 N. Crescent Dr. #100**
 CITY-ST-ZIP **Beverly Hills, CA 90210**

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Larry Takahashi**

4/24/2004
 Date

310 432 1903
 Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Attachment

14019375
FO2000000688

WOLFGANG PUCK WORLDWIDE, INC.

TITLE

DIRECTOR
(Addition)

NAME

MITCHELL JACOBSON

ADDRESS

100 N. CRESCENT DR. #100 BEVERLY HILLS, CA 90210