2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

F02000000688

DOCUMENT # 1. Entity Name
WOLFGANG PUCK WORLDWIDE, INC.



May 02, 2003 8:00 am 8 Secretary of State 05-02-2003 90201 025 ***150.00 **FILED**

						1	ETRIS								
Principal Place of Business 100 CRESCENT DRIVE, SUITE 100 BEVERLY HILLS CA 90210			Mailing Address 100 CRESCENT DRIVE. SUITE 100 BEVERLY HILLS CA 90210					1							
2. Principal P	lace of Busin	ness	3. Mailing Address					,							1 10101 1011 1001
Suite, Apt.	#, etc.		Suite, Apt. #, etc.							CHEC	K HER	E IF MA	KING (CHANGES	
City & State			City & State					4. FEI Number 95-4809367 Applied For Not Applicable							
Zip	Country				Country	Country			5. Certificate of Status Desired S8.75 Additional Fee Required						ditional
6. Name and Address of Current			Registered Agent				7. Name and Address of New Registered A								
<u> </u>				<u> </u>		Name	···· ····					 -			=
PARACOF	IP INCORP	ORATED			-										
236 EAST 6TH AVENUE						Street A	.ddress (P.0	P.O. Box Number is Not Acceptable)							
TALLAHAS										_					
						City							FL	Zip Coo	Je .
R The above	named entity	y submits this statement for	the pure	nose of changing its	rogistered	Office or	registeres	d agent /	or both	in the S	tate of F			miliar with	and accept
	ions of regist		the purp	oce or changing its	registered	Office Of	registered	agoni, i)		tate of t	ionua.	1 cili izi	ina wai	and accept
SIGNATURE .	Cinantus hand	or printed name of registered agent a		-1111-	. Danishana d								DATE		
			no ma n abt	T (NOTE	: Hegistered A	tgent signat	ure required wh	nen reinstati	ng)						
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								,	9. Electi Trust		npaign F ontribut		9 □		00 May Be d to Fees
10.		OFFICERS AND D	DIRECTO	I DRS	11.			ADDITE	ONS/CH	IANGES	S TO OF	FICERS	AND E	DIRECTOR	S IN 11
TITLE	PSTD		-	Delete	TITLE						_			Change	Addition
NAME	Kautz, R				NAME]								_
STREET ADDRESS			0		STREET	ADDRESS									
CITY-ST-ZIP		HILLS CA 90210			CITY-S	T-ZIP									
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NAME	PUCK, WO		^		NAME		1								}
STREET ADDRESS CITY-ST-ZIP		CENT DRIVE, SUITE 10 HILLS CA 90210	U		CITY-S	ADDRESS									
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TITLE	D			□ Delete	TITLE									Change	Addition
NAME	SCULLEY,	DAVID		00,000	NAME								·		
STREET ADDRESS		CENT DRIVE, SUITE 100	0		STREET	ADDRESS									
CITY-ST-ZIP	BEVERLY	HILLS CA 90210			CITY-S	1-ZIP									
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STREET ADDRESS		•				ADDRESS									}
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TITLE				Delete	TITLE								[Change	☐ Addition
NAME STREET ADDRESS					NAME	ADDOCCO]
						address f-zip									
0(11-01-21)					VIII-31	- ZIF	l								1

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 express, with all other like empowered.

SIGNATURE: