2003 FOR PROFIT CORPORATION

F93000002655

700

FILED Apr 25, 2003 8:00 am Secretary of State

04-25-2003 90259 004 ***150.00

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

KOO KOO ROO, INC.										
Principal Place C/O PRANDIUI 2701 ALTON P IRVINE CA 926 US	M INC PKWY	Mailing Address C/O PRANDIUM INC 2701 ALTON PKWY IRVINE CA 92606 US	1							
2. Principal Pl	ace of Business	3. Mailing Address c/o Prandium, Tax Dept.			1 1004500				21 0 1 0 451 10 0 1	
Suite, Apt.	#, etc.	Suite, Apt. #, etc. 2701 Alton Pkwy.			CHECK HERE IF MAKING CHANGES					
City & State	9	City & State Irvine, CA			4. FEI Numbe	22-3132583		No	plied For t Applicable	
Zip	Country .	92606-5149	Country USA			of Status Desired	□ Fe	3.75 Add e Required		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name						
C T CORPORATION SYSTEM										
	TH PINE ISLAND ROAD		Street Address (P.O. Box Number is Not Acceptable)				
PLANTATIO	ON FL 33324							Ì		
			City				FL	Zip Code		
	named entity submits this statement for ions of registered agent.	the purpose of changing its reg	jistered office or	registere	d agent, or both	n, in the State of Flo	orida. I am fan	niliar with,	and accept	
SIGNATURE .										
	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: Re	egistered Agent signatu	re required v	vhen reinstating)		DATE			
After	분E NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of	State				ction Campaign Fi st Fund Contributio			May Be to Fees	
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/	CHANGES TO OFF	ICERS AND D	IRECTORS	3 IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP RELYEA, KEVIN S 2701 ALTON PKWY IRVINE CA 92606-5149	☑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				[_ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MALANGA, MICHAEL E 2701 ALTON PKWY IRVINE CA 92606-5149	🙀 Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP] Change	Addition .	
_TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT TREBING, ROBERT T JR. 2701 ALTON PKWY IRVINE CA 92606-5149	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P/	J		<u></u>	Change	Addition	
	S RULE, MICHAEL A 2701 ALTON PKWY IRVINE CA 92606-5149	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/V			<u>[</u>	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2701	ley D. H Alton P ne, CA 9			Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	ertify that the information supplied with	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS Kath 2701 Irvi	leen D. Alton P ne, CA 9	Sorensen kway. 2606-5149		Change	Addition	

indicated on this report or supplemental teport is fue 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 trusteb 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 actives, with all other like empowered.

REQUIREDRobert T. Trebing, Jr. x 4/2/03