

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 18, 2001 8:00 am**  
**Secretary of State**  
 04-18-2001 90045 039 \*\*\*150.00

**DOCUMENT # F94000000387**

1. Entity Name  
**CHI-CHI'S, INC.**

Principal Place of Business

**C/O PRANDIUM INC  
 2701 ALTON AVE  
 IRVINE CA 92606  
 US**

Mailing Address

**C/O PRANDIUM INC  
 2701 ALTON AVE  
 IRVINE CA 92606  
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **41-0901437**

Applied For  
 Not Applicable

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 reinstalling) DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00  
 After MAY 1, 2001 Fee will be \$550.00  
 Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

|  |  |  |
|--|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DP<br>CHAMNESS, ROGER K.<br>10200 LINN STATION ROAD<br>LOUISVILLE KY 40223 | <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | S<br>DOYLE, TODD E.<br>18831 VON KARMAN AVE.<br>IRVINE CA 92612            | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | SRV<br>KATAPSKI, LAURIE<br>10200 LINN STATION ROAD<br>LOUISVILLE KY 40223  | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>RELYEA, KEVIN S.<br>18831 VON KARMAN AVE.<br>IRVINE CA 92612          | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DV<br>TREBING, ROBERT T JR<br>18831 VON KARMAN AVE.<br>IRVINE CA 92612     | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | T<br>GONDA, ROBERT D<br>18831 VON KARMAN AVE.<br>IRVINE CA 92612           | <input type="checkbox"/> Delete            |

|  |  |  |
|--|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | V/D<br>Malanga, Michael, E.<br>18831 Von Karman Avenue<br>Irvine, CA 92612 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | SEE COMPLETE LIST OF OFFICERS & DIRECTORS ATTACHED                         | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D/CEO/P<br>Relyea, Kevin, S.<br>18831 Von Karman Ave.<br>Irvine, CA 92612  | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | T/V<br>Gonda, Robert, D.<br>18831 Von Karman Ave.<br>Irvine, CA 92612      | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

Robert T. Trebing, Jr.

4/4/01

949-757-7900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

Attachment  
DFF94XXXX387  
AW57611

**CHI-CHI'S, INC.**  
(a Delaware Corporation)

**OFFICERS AND DIRECTORS**

Kevin S. Relyea  
Chief Executive Officer  
President  
Director  
18831 Von Karman Avenue  
Suite 400  
Irvine, CA 92612-1537

Todd E. Doyle  
Secretary  
18831 Von Karman Avenue  
Suite 400  
Irvine, CA 92612-1537

Robert T. Trebing, Jr  
Vice President  
Director  
18831 Von Karman Avenue  
Suite 400  
Irvine, CA 92612-1537

Robert D. Gonda  
Vice President  
Treasurer  
18831 Von Karman Avenue  
Suite 400  
Irvine, CA 92612-1537

Laurie A. Katapski  
Sr. Vice President – Marketing  
10200 Linn Station Road  
Louisville, KY 40223-3888

Lisa C. Manuel  
Vice President  
18831 Von Karman Avenue  
Suite 400  
Irvine, CA 92612-1537

Michael E. Malanga  
Vice President  
Director  
18831 Von Karman Avenue  
Suite 400  
Irvine, CA 92612-1537

Michael A. Rule  
Assistant Secretary  
18831 Von Karman Avenue  
Suite 400  
Irvine, CA 92612-1537

Kathleen D. Sorensen  
Assistant Secretary  
18831 Von Karman Avenue  
Suite 400  
Irvine, CA 92612-1537