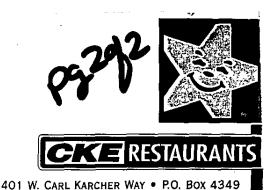
2001 UNIFORM BUSINESS REPORT (UBR) SECRETARY OF TALLAHASSEE, FLORIDA DOCUMENT # Entity Name ni AUG - I PM 1:32 FLAGSTAR ENTERPRISES 3. Mailing Address 2. Principal Place of Business 401: W. CARL KARCHER WAY 401 W. CARL KARCHER WAY Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number City & State City & State ANAHEIM ANAHEIM CA57-0900036 Not Applicable \$8.75 Additional Country Country 5. Certificate of Status Desired 92801 USA USA Fee Required 46. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS ST. TALLAHASSEE, FL 32301 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FLE NOWIN FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of Sta 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. PRESIDENT 17: ☐ Delete TITLE TITLE ANDREW PUZDER NAME MALE -08/15/01--01020--023 STREET ACCORESS STREET ADDRESS 401 W. CARL KARCHER ****600.00 ****150.0 CITY-ST-ZIP CITY-ST-ZIP ANAHEIM CA 92801 Addition SECRETARY Change TITLE ☐ Delete TITLE E. MICHAEL MURPHY NAME NAME IZOC N. HARBOR BLVD. STREET ADDRESS STREET ADORESS CITY-ST-ZIP ANAHOM CA 92801 CITY-ST-ZEP ☐ Deleta ☐ Chance ☐ Addition TITLE TITLE VP. TAX DOUGLAS P. LOWRY HALE NULE STREET ADDRESS 601 5 LEWIS ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DRANGE CA 92668 ☐ Delete Addition TITLE ☐ Change TIDE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE TITLE Delete MALE NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE TITLE Delete NAME MAME SP STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not quality 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. DOUGLAS Non SIGNATURE:



ANAHEIM, CALIFORNIA 92803-4349

714-774-5796

July 25, 2001

FI Secretary of State Uniform Business Report Division of Corporations P. O. Box 1500

Dear Secretary,

Tallahassee, FL 32302-1500

Enclosed are four 2001 UBR's for corporations I am responsible. Please accept this letter as a written request for abatement of any penalty. My income tax manager had a heart attack on 4/21/01 just prior to the due date of these reports. As a résult of her unplanned absence, we had difficulty in maintaining all of our filing requirements. We recently discovered that these reports had not been filed timely as required and I have prepared them based on information available. It is unknown what happened to those documents which your department would have mailed to us.

Please contact me if there are any problems associated with these filings. We are in process of selling a restaurant owned by one of the companies and need to ensure that the company is in good standing as we approach the closing date.

Best regards.

Doug Lowry

VP - Tàx

CKE Restaurants, Inc.

(714) 939-7011