2001 UNIFORM BUSINESS REPORT (UBR)

Mar 08, 2001 8:00 am Secretary of State DOCUMENT # F9700001571 1. Entity Name CAFE SFA - MINNEAPOLIS, INC. 03-08-2001 90114 001 ***150.00 Principal Place of Business Mailing Address 750 LAKESHORE PARKWAY 750 LAKESHORE PARKWAY TAX DEPT. TAX DEPT. BIRMINGHAM AL 35211 BIRMINGHAM AL 35211 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 22-2377052 Not Applicable \$8.75 Additional Country Zip Zio 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code FL 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 Fiorida. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME MARTIN, BRIAN J STREET ADDRESS STREET ADDRESS 750 LAKESHORE PKWY CITY-ST-ZIP CITY-ST-ZIP **BIRMINGHAM AL 35211** ☐ Addition ☐ Delete ☐ Change TITLE NAME NAME COLTHARP, DOUGLAS STREET ADDRESS STREET ADDRESS 750 LAKESHORE PKWY CITY-ST-ZIP CITY-ST-ZIP **BIRMINGHAM AL 35211** Change ☐ Addition TITLE □ Delete TITLE -VAS NAME NAME MAYS, BRADLEY R STREET ADDRESS STREET ADDRESS 5810 SHELBY OAKS DR. CITY-ST-ZIP CITY-ST-ZIP MEMPHIS TN 38134 Change ☐ Addition TITLE Delete TITLE VAS NAME NAME BENTLEY, JULIA STREET ADDRESS STREET ADDRESS 115 N. CALDERWOOD ST. CITY-ST-ZIP CITY-ST-ZIP ALCOA TN 37701 ☐ Change ☐ Addition TITLE TITLE VAS Delete NAME WRIGHT, DONALD NAME STREET ADDRESS STREET ADDRESS 750 LAKESHORE PKWY CITY-ST-ZIP CITY-ST-ZIP **BIRMINGHAM AL 35211** ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME HANSEN, CHARLES J STREET ADDRESS STREET ADDRESS 750 LAKESHORE PKWY CITY-ST-ZIP CITY-ST-7IP **BIRMINGHAM AL 35211** 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.

FILED

SIGNATURE: Bradley R. Mays 2-28.01 205-940-474