2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 18, 2005 8:00 am Secretary of State DOCUMENT # F97000003396 04-18-2005 90306 015 ***150.00 WOLFGANG PUCK FOOD COMPANY, INC. Principal Place of Business Mailing Address ₹ te * ± ± 100 N. CRESCENT DR., SUITE 100 100 N. CRESCENT DR., SUITE 100 **BEVERLY HILLS, CA 90210** BEVERLY HILLS, CA 90210 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04012005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 95-4100729 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 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 Street Address (P.O. Box Number is Not Acceptable) PLANTATION, FL 33324 Zip Code FI 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. P/C/D/CEO **PSD** TITLE X Delete TITLE Change Addition NAME KAUTZ, ROB G NAME Puck, Wolfgang 100 N. Crescent Dr. Suite 100 STREET ADDRESS 2901 CORDA LANE STREET ADDRESS CITY-ST-7IP LOS ANGELES, CA 90049 CITY-ST-ZIP Beverly Hills, CA 90210 **⊤/**≴ CDCF ☐ Delete TITLE TITLE ☐ Change ■ Addition PUCK, WOLFGANG J NAME NAME Essa, Joseph STREET ADDRESS 805 N. SIERRA DR. STREET ADDRESS 100 N. Crescent Dr. #100 CITY-ST-7IP BEVERLY HILLS, CA 90210 CITY-ST-7IP Beverly Hals, CA 90210 TITLE Delete TIT! F ☐ Change ■ Addition NAME KARAS, DON A NAME STREET ADDRESS 7226 VALENCIA DR STREET ADDRESS CITY-ST-7iP BOCA RATON, FL 33433 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition NAME LAWRIE, JUDITH P NAME STREET ADDRESS 63 FAIRVIEW ROAD STREET ADDRESS WESTON, MA 02493 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE NAME SCULLEY, DAVID NAME **BLACKBURN ROAD** STREET ADDRESS STREET ADDRESS CITY-ST-7IP SEWICKLEY, PA 15142 CITY-ST-7IP TITLE **VTAS** ☐ Change Delete TITLE ☐ Addition NAME TAKAHASHI, LARRY NAME 508 CALLE MAYOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP REDONDO BEACH, CA 90277 CITY-ST-ZIP I hereby certify that the information indicated on this report or suppler of the corporation or the receive of 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 ental 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 trusted en powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

ess, with all other like empowered.

changed, or on an attac

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