

2002-UNIFORM BUSINESS REPORT (UBR)

FILED
May 09, 2002 8:00 am
Secretary of State

05-09-2002 90011 019 ***150.00

DOCUMENT # F98000001619

1. Entity Name

BEST FRANCHISING, INC.

Principal Place of Business

**13 CORPORATE SQUARE, STE. 250
 ATLANTA GA 30329**

Mailing Address

**13 CORPORATE SQUARE, STE. 250
 ATLANTA GA 30329**

040000



DO NOT WRITE IN THIS SPACE

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

58-2373272

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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, 2002 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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**CCEO
 LEVEN, MICHAEL A
 13 CORPORATE SQUARE, STE. 250
 ATLANTA GA 30329** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**SEE ATTACHED
 EXHIBIT "A"** ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**SVPF
 DAYMAN, MARK
 13 CORPORATE SQUARE, STE. 250
 ATLANTA GA 30329** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VPS
 ARONSON, STEPHEN D
 13 CORPORATE SQUARE, STE. 250
 ATLANTA GA 30329** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VPDC
 ROMANIELLO, STEVE
 13 CORPORATE SQUARE, STE. 250
 ATLANTA GA 30329** ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**DIRECTOR
 MIKE LEVEN
 13 CORPORATE SQ, SUITE 250
 ATLANTA GA 30329** ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**DIRECTOR
 DOUGLAS GEDGA
 200 WEST MADISON
 CHICAGO, ILLINOIS 60606** ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/02

Date

404.235.7468

Daytime Phone #

CR2E034 (9/01)

Exhibit "A"
List of Officers and Directors for Best Franchising, Inc.

<u>OFFICERS</u>		<u>MAILING ADDRESS</u>
Michael Leven	At will of Board of Directors, or until officer's earlier death, resignation, removal, retirement or disqualification	13 Corporate Square, Suite 250 Atlanta, GA 30329
Stephen Aronson	Same as above	13 Corporate Square, Suite 250 Atlanta, GA 30329
Mark Dayman	Same as above	13 Corporate Square, Suite 250 Atlanta, GA 30329
<u>DIRECTORS</u>		
Michael Leven	Same as above	13 Corporate Square, Suite 250 Atlanta, GA 30329
Douglas G. Geoga	Same as above	Madison Plaza 200 West Madison, Suite 3800 Chicago, Illinois 60606

Attachment Doc # 9800001619