

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# H07218

FILED  
Jan 16, 2003  
Secretary of State

Entity Name: KITCHEN CLASSICS, INC.

## Current Principal Place of Business:

% CYRIL F. SCHRAGE  
4265-K TAMiami TR  
CHARLOTTE HARBOUR, FL 33980

## New Principal Place of Business:

## Current Mailing Address:

% CYRIL F. SCHRAGE  
4265-K TAMiami TR  
CHARLOTTE HARBOUR, FL 33980

## New Mailing Address:

FEI Number: 59-2425957

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHRAGE, CYRIL F.  
2418 GREENLAND CT  
PORT CHARLOTTE, FL 33983

## Name and Address of New Registered Agent:

SCHRAGE, CYRIL F.  
2418 GREENLAND CT  
PUNTA GORDA, FL 33983

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:

01/16/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: SCHRAGE, CYRIL F.,  
Address: 2418 GREENLAND CT.  
City-St-Zip: PORT CHARLOTTE, FL

Title: VTD ( ) Delete  
Name: SCHRAGE, ELIZABETH J.,  
Address: 2418 GREENLAND CT  
City-St-Zip: PORT CHARLOTTE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: SCHRAGE, CYRIL F.,  
Address: 2418 GREENLAND CT.  
City-St-Zip: PUNTA GORDA, FL 33983

Title: VTD (X) Change ( ) Addition  
Name: SCHRAGE, ELIZABETH J.,  
Address: 2418 GREENLAND CT  
City-St-Zip: PUNTA GORDA, FL 33983

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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CYRIL F. SCHRAGE

PSD

01/16/2003

Electronic Signature of Signing Officer or Director

Date