2002 UN	IFORM BUSI	NESS REPO	, Jun 19.	 FILED Jun 19, 2002 8:00 am Secretary of State 05-22-2002 90067 015 ****50.00 		884900			
	T # L010000					5			
 Entity Name 	Taurant & Bar, LL(
Principal Place of Business 100 S.E. 2ND STREET, SUITE 3950 MIAMI FL 33131		Mailing Address 100 S.E. 2ND STREET, SUITE 3950 MIAMI FL 33131			9421	4			
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		, DO NO	T WRITE IN THIS SPACE			1423 . 1423	
City & State		City & Stale		4. FEI Number 65-1141		ed For		8:	
Zip	Country	Zip	Country	5. Certificate of Status De	\$5.00 A.(14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	ne and Address of Current I	Registered Agent		7. Name and Address of				inanalist II II	
WEIDER, NORMAN S ESQ. 100 S.E. 2ND STREET, SUITE 3950 MIAMI FL 33131 8. The above named entity submits this statement for the purpose of ch SIGNATURE Signature, typed or printed name of registered agent and tote if applicable. Make C 9. MANAGING MEMBERS/MANAGERS		Street Address		ress (P.O. Box Number is Not Acc	eptable)				
			City	· · · · · · · · · · · · · · · · · · ·	FL Zip Code				
		Make Check P Du	IOW!!! FEE IS \$50 ayable to Departm Le By May 1, 2002	ant of State	TIONS/CHANGES				
ITLE IAME ITREET ADDRESS ITY-ST-ZIP			TITLE		CRM Change [Addition			
ITLE IAME ITREET ADDRESS ITTY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change (Addition C	5		
ITLE IAME ITREET ADDRESS ITY-ST-ZIP	··· -	Delete	- TITLE - NAME	·		Addition			
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ITLE AME TREET ADDRESS ITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP			Addition			
1. I hereby certify that t indicated on this reg	the information supplied with fort is true and accorde and t	this tilling does not qualify for has pay signature shall have	or the exemption stated the same legal effect a	in Section 119.07(3)(i), Florida Sta as if made under oath; that I am a Chapter 608, Florida Statutes.	tutes. I further certify that the informanaging member or manager of	mation the			

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