FILED

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPES OR P

NAME OF SIGN

Aug 15, 2001 8:00 am Secretary of State P00000029594 DOCUMENT # 1. Entity Name 08-15-2001 90003 028 ***150.00 SOUTHEAST BRANDS MANAGEMENT, INC. Principal Place of Business Mailing Address A0081180 9250 MARY STREET 210 ward Avenue 3250 MARY STREET Ste 105 STE. 303 STE. 303/ Hono Inh Hawav MIAMI FL 33133 MJAMI FL 33133 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-10 | 245*8* Not Applicable 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 Name MALE, MICHAEL H Street Address (P.O. Box Number is Not Acceptable) 3250 MARY STREET STE. 303 **MIAMI FL 33133** 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 150) Pease refer to the attached. FILE NOW!!! FEE IS \$550:00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After September 12, 2001 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11, OFFICERS AND DIRECTORS 12, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (5/01) TITLE ☐ Delete TITLE ☐ Addition MCPHAIL, DEAN B NAME NAME 220 WARD AVE. BLDG. A STE. 105 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HONOLULU, HAWAII 96 814 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE Meier, Greq NAME NAME 210 ward Are Stc 105 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Honolul HI 9684 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-ZIP 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 the empowered.

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Attentionen

FLORIDA OFFICE

JJC FLORIDA, LLC JAMBA JUICE FLORIDA

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HAWAII OFFICE

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POOD DO029554

August 1, 2001

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: Southeast Brands management, Inc

To Whom It May Concern:

This letter is to document my telephone discussion with Mary of your offices on August 1, 2001. I recently received the 2001 Uniform Business Report for Southeast Brands Management, Inc. for filing with the Secretary of State.

This is our first full year of operations in Florida, and so these business and tax forms are new to us. This form states that it is a second notice due September 12, 2001, and per the instructions the initial deadline was May 1st of this year; however, this is the first time I have received this form for Southeast Brands Management, Inc.

As such, I would like to request a waiver of the \$400 late fee. I am enclosing a check for the original amount of \$150 and will look forward to receiving a confirmation from your office as to the acceptance of this form as filed.

As instructed by your office, in the future, we will contact your offices immediately if we do not receive this form in the mail by the end of January.

If you have any questions, please do not hesitate to contact me at (808) 545-1149 x12.

Very trilly vours

Lianne Gakiva