2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED May 21, 2002 8:00 am Secretary of State

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DOCU	IMENT# 🛼	000004470			05-21-2002 90				
1. Entity Na	FU	000004173	,9 <u> </u>						
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	ZA CAFE, INC.				<u>[</u>				
Principal Plac	ce of Business		Mailing Ad	dress	•				
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						İ			•
2. Principal Place of Business			3. Mailing Ad	dress					
2955 PINEDA CAUSEWAY			2955 PINEDA CAUSEWAY						
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE		
124	<u> </u>		24		<u> </u>				
City & State MELBOURNE, FL		١,	City & State				FEI Number		Applied For
Zip	Country	IV	/IELBOUR Zip	NE, FL	Country		3720926		Not Applicable
32904	,	3	2904		Country	5. (Certificate of Status		Additional
	6. Name and Address			ent -	- L		nie arid Aridress o	Fee Red of New Registered Ag	quired
AVE, SHI	IRLEY M.		· · · · · · · · · · · · · · · · · · ·		Name			registered Ag	pent -
955 PINE	DA CAUSEWAY,	USITE 124							
MELBOUR	RNE, FL 32904				Street Add	dress (P.O. E	lox Number is Not /	Acceptable)	
									
ı.									
					City				
					City			FL ²	ip Code
The ob-							4		
. The above	anamed entity submits the	nis statement f	or the purpos	e of changi	ng its registered o	office or regis	Jefed agent or bott	h in the State of Floria	1-
	e named entity submits th	nis statement f	or the purpos	e of changi	ng its registered o	office or regis	tered agent, or boti	h, in the State of Florid	la.
IGNATURE	Signature, typed or printed	name of registe	red agent and f	itle if applical	ble. (NOTE: Reg	jistered Agent	signature required wh	en reinstating)	Date
GNATURE This corpo	Signature, typed or printed	name of registe	red agent and	itle if applical	ble. (NOTE: Reg	pistered Agent	signature required who	en reinstating)	
IGNATURE This corpo	Signature, typed or printed pration is eligible to satist filing requirement and ele	name of registe	red agent and f	itle if applical	PEE IS \$150.00	pistered Agent	signature required wh	en reinstating) aign Financing	Date
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4/29/2002

Attachment

RAYMOND E. WASSER, CPA 180 Maple Drive Satellite Beach, FL 32937 #P00000041739 663784

Invoice Number: 040223

Invoice

Invoice Date: 4/29/2

Page:

Voice: 321 773-4473 Fax: 321 773-4473

Sold To:

The Plaza Cafe, Inc. 2955 Pineda Causeway Suite 124 Melbourne, FL 32904

--- Customer ID: PLAZACAFE

	The same of the sa			
Customer PO	Payment Terms	Sales Rep ID	Due Date	
:	Net 10 Days		5/9/2	
Descri	ption		Amount	
Review and summarize sales 2002.	and sales tax due infor	mation for March,	,	
Preparation of 2002 Unifor Total Invoice	m Business Report, with	revised addresses.	65.00	
Thanks, I appreciate the o	pportunity to be of serv	ice!	63.00	

Check No:

Subtotal 65.00

Sales Tax

Total Invoice Amount 65.00

Payment Received 0.00

TOTAL 65.00