

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 18, 2001 8:00 am
Secretary of State

05-03-2001 90913 004 ***150.00

| | | | |
|---|--|--|---|
| DOCUMENT # P00000062296 | | | |
| 1. Entity Name ELLEN'S ORIENTAL, INC. | | | |
| Principal Place of Business 7628-3 103RD ST. JACKSONVILLE FL 32210 | | Mailing Address 7628-3 103RD ST. JACKSONVILLE FL 32210 | |
| 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 59-365300 | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent JOHNS, MILTON 5640-1 TIMUQUANA RD. JACKSONVILLE FL 32221 | | 7. Name and Address of New Registered Agent 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small> | | | |
| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/> <small>(See criteria on back)</small> | | FILE NOW!!! FEE IS \$550.00 After September 12, 2001 Fee will be \$750.00 Make Check Payable to Department of State | |
| 10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | | \$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 | PSD ALLEY, ELEANOR M 7628-3 103RD ST. JACKSONVILLE FL 32210 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VTD ALLEY, ROBIN S 7628-3 103RD ST. JACKSONVILLE FL 32210 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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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: *Eleanor Alley*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)

ATTACHMENT

MILTON JOHNS & ASSOCIATES, EA
FIRST COAST TAX AND ACCOUNTING

9945

ACCOUNTING & TAX SERVICE
5640-1 TIMUQUANA RD
JACKSONVILLE, FL. 32210
Telephone 771-1040

904-771-1040¹
FAX 904-573-6772

July 11, 2001

P000000062296

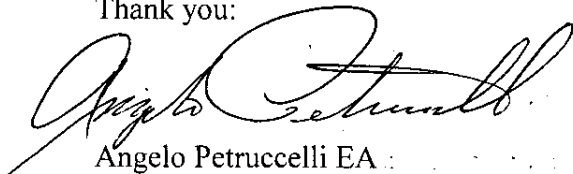
Division of Corporations
State of Florida

Re: Ellen's Oriental Inc.
P00000062296

To Whom it May Concern:

Ellen Alley of Ellen's Oriental sent her fee in for The Uniform Business Report on April 14, 2001 But neglected to enter her Employers Identification number. Due to her inability to speak the English language she did not correspond with your department on the next notice. Please except this notice as verification of her ID# 59-3655300. If I can be of any further assistance please feel free to call me.

Thank you:



Angelo Petruccelli EA