

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 22, 2002 8:00 am**  
**Secretary of State**

07-22-2002 90160 012 \*\*\*\*61.25  
05-27-2002 90307 042 \*\*\*150.00

DOCUMENT # **P00000083393**  
1. Entity Name  
**TABU BISTRO & NIGHTCLUB**

**80130738**

**DO NOT WRITE IN THIS SPACE**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
**9 Stone Street**  
Suite, Apt. #, etc.

3. Mailing Address  
**9 Stone St**  
Suite, Apt. #, etc.

City & State  
**Cocoa FLORIDA**  
Zip  
**32922**  
Country  
**USA**

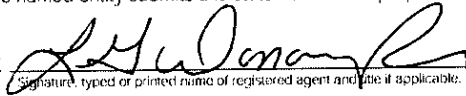
City & State  
**Cocoa FLORIDA**  
Zip  
**32922**  
Country  
**USA**

4. FEI Number  
**59-3668319**  
Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent  
Name  
**Larry Donovan, JR**  
Street Address (P.O. Box Number is Not Acceptable)  
**4480 Dickens Ave**  
City  
**Titusville** FL Zip Code  
**32780**

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  DATE **7-17-02**  
(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**January 1 - May 1 Fee is \$150.00**  
**After May 1, Fee is \$550.00**  
**Amended UBR is \$61.25**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS			
TITLE	NAME	TITLE	NAME
President	Larry G DONOVAN JR 4480 Dickens Ave Titusville Florida 32780		
Vice President	Gretchen Jacobsen 1043 Myrtle Ln Cocoa Florida 32922		
Secretary	Bradley Kratzer 4480 Dickens Ave Titusville Florida 32780		
Treasurer	RITA Rosenberger 1043 Myrtle Ln Cocoa Florida 32922		

**DO NOT WRITE IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE **7-17-02** Daytime Phone # **3216398228**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR