


2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 SEP -4 PM 12:35

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P0000083393	
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1. Entity Name TABU BISTRO AND NIGHTCLUB, INC.	Principal Place of Business 9 STONE STREET COCOA, FL 32922	Mailing Address 9 STONE STREET COCOA, FL 32922
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address 12535 ORANGE DR #615 DAVIC, FL
City & State	City & State
Zip	Country
33330	USA

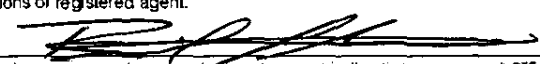


☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-3668318	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent JACOBSEN, GRETCHEN 1043 MYRTLE LANE COCOA, FL 32922
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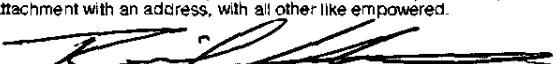
7. Name and Address of New Registered Agent Name Richard LA RUSSO Street Address (P.O. Box Number is Not Acceptable) 12535 ORANGE DRIVE # 615 City DAVIC FL Zip Code 33330
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	SIGNATURE 	DATE 9/02/03
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FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$650.00 Amended UBR is \$61.26 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JACOBSEN, GRETCHEN 1043 MYRTLE LANE COCOA, FL 32922 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KRATZER, BRADLEY 4480 DICKENS AVE TITUSVILLE, FL 32780 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ROSENBERGER, RITA 1043 MYRTLE LANE COCOA, FL 32922 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Richard LA RUSSO 12535 ORANGE DR # 615 DAVIC, FL 33330 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Angelina Mennulty 12535 ORANGE DR # 615 DAVIC, FL 33330 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	500022738995 09/04/03--01005--003 **70.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
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"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	SIGNATURE: 	DATE 9/02/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #

CR2E034 (10/02)

7/9/4