

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000041467

1. Entity Name
PAUL'S INTERNATIONAL KITCHEN, INC.

Principal Place of Business
4040 W. SILVER SPRINGS BLVD.
OCALA FL 34475

Mailing Address
4040 W. SILVER SPRINGS BLVD.
OCALA FL 34475

2. Principal Place of Business
Suite, Apt. #, etc.
City & State

3. Mailing Address
4040 W Silver Springs
Suite, Apt. #, etc.
BLVD
City & State
OCALA, FL 34482

4. FEI Number
59-2858057

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

6. Name and Address of Current Registered Agent
CAVANAUGH, ERIC
464 S.E. 61ST CT.
OCALA FL 34472

7. Name and Address of New Registered Agent

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: *[Signature]* DATE: 9/11/02

(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PAUL POZO TOWNER <input type="checkbox"/> Delete 4110 NW BRIGHTON RD A-6 OCALA FL 34482	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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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

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 information.

SIGNATURE: *[Signature]* DATE: 9/11/02

SIGNATURE REQUIRED

SIGNATURE MUST BE TYPED OR PRINTED IN BLOCK OF SIGNING OFFICER OR DIRECTOR

FILED
02 OCT 14 AM 11:37
SECRETARY OF STATE
TALLAHASSEE FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E034 (4/02)

October 03, 2002

**DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FLORIDA 32314**

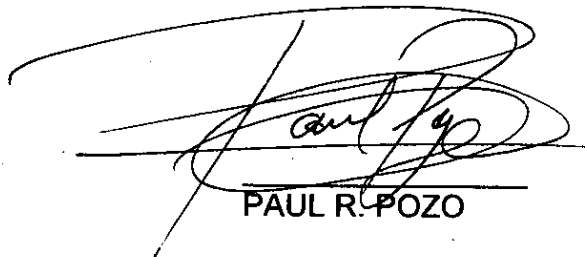
REF# P01000041467

This letter is to explain the situation in which an incorrect address of my restaurant caused me not to receive my UBR statement.

I'm The owner of Paul's International Kitchen, my restaurant is located inside the Comfort Inn Hotel in Ocala Florida, in which we have one premises with different address, my UBR letter of renewal was sent to the Hotel address that's why I never received a notice letter.

On 9/11/02 I talked to a representative of the UBR department and inform her of the situation, I asked her if I needed to put the facts in writing, she told me that it was not necessary and that she was going to fix my address and this will take care of the problem but it didn't. I just received another notice, I hope the department could understand the circumstances that led to this problem in which I'm been Penalized for a situation that was out of my control.

Yours truly,



PAUL R. POZO