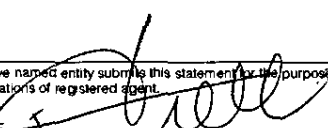
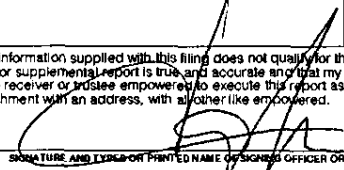


FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90179 015 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000077428		
1. Entity Name CHEZ NOUS INC.		
Principal Place of Business 11155 SW 160 COURT MIAMI, FL 33196		Mailing Address 11155 SW 160 COURT MIAMI, FL 33196
2. Principal Place of Business 12217 SW 131 AVE Suite, Apt. #, etc.		3. Mailing Address 12217 SW 131 AVE Suite, Apt. #, etc.
City & State Miami, FL		City & State Miami, FL
Zip 33186		Country USA
4. FEI Number 65-1132927		Applied For Not Applicable
5. Certificate of Status Desired 8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent LANCRI, FRED 11155 SW 160 COURT MIAMI, FL 33196		7. Name and Address of New Registered Agent Name FRED LANCRI Street Address (P.O. Box Number is Not Acceptable) 12217 SW 131 AVE City Miami FL Zip Code 33186
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 x 4/14/03 (NOTE: Registered Agent signature required while retaining.)		
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$650.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY-ST-ZIP MICKAEL, LANCRI 6700 COLLINS AVE MIAMI BEACH, FL 33196		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE NAME STREET ADDRESS CITY-ST-ZIP FRED LANCRI 12217 SW 131 AVE MIAMI, FL 33186
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 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.		
SIGNATURE:  DATE 04-14-03 (786) 246-3456		

CR2E034 (10/02)