

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000099181

1. Entity Name
CURBSIDE CAFE, INC.

Principal Place of Business

2024 NORDMAN AVENUE
NEW SMYRNA BEACH FL 32168

933 W. International Speedway Blvd
Daytona Beach, FL 32114

Mailing Address

2924 NORDMAN AVENUE
NEW SMYRNA BEACH FL 32168

Same

2. Principal Place of Business

3. Mailing Address

933 W. Int. Speedway Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Daytona Beach, FL

Zip

32114

Country

USA

4. FEI Number

59-3749524

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CUTLER, RONALD
1172 PELICAN BAY DRIVE
DAYTONA BEACH FL 32119

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
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

TITLE D
NAME RALEY, KAREN J
STREET ADDRESS 2924 NORDMAN AVENUE
CITY-ST-ZIP NEW SMYRNA BEACH FL 32168

Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
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CITY-ST-ZIP

Change Addition

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CITY-ST-ZIP

Change 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 empowered.

SIGNATURE:

Karen J. Raley

4/30/02

(386)238-1178

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KAREN J. RALEY

DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)