

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000012710

FILED  
Apr 30, 2003  
Secretary of State

Entity Name: OLDE TIMES DELI CO.

## Current Principal Place of Business:

3681 CASSIA DRIVE  
ORLANDO, FL 32828

## New Principal Place of Business:

3891 AVALON PARK EAST BLVD  
ORLANDO, FL 32828

## Current Mailing Address:

3681 CASSIA DRIVE  
ORLANDO, FL 32828

## New Mailing Address:

14333 PEACOCK SPRINGS TRAIL  
ORLANDO, FL 32828

FEI Number: 61-1404049

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SMITH, PAUL  
218 SOUTHERN COUNTRY LANE  
QUINCY, FL 32351 US

## Name and Address of New Registered Agent:

MIXKAHN, SUZANNE  
14333 PEACOCK SPRINGS TRAIL  
ORLANDO, FL 32828

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: SUZANNE MIXKAHN

04/30/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WOJCICKI-MIX, SUZANNE A  
Address: 1812 DIXIE BELLE DRIVE  
City-St-Zip: ORLANDO, FL 32812

Title: DVP ( ) Delete  
Name: KAHN, MARK  
Address: 3681 CASSIA DRIVE  
City-St-Zip: ORLANDO, FL 32828

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MIX-KAHN, SUZANNE A  
Address: 14333 PEACOCK SPRINGS TRAIL  
City-St-Zip: ORLANDO, FL 32828

Title: DVP (X) Change ( ) Addition  
Name: KAHN, MARC D  
Address: 3681 CASSIA DRIVE  
City-St-Zip: ORLANDO, FL 32828

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUZANNE A MIX-KAHN

PD

04/30/2003

Electronic Signature of Signing Officer or Director

Date