2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

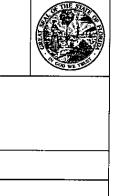
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

P02000106468 **DOCUMENT #**

1. Entity Name

SIGNATURE: _

THE KITCHEN OF MIAMI CORPORATION



FILED Feb 21, 2003 8:00 am Secretary of State

02-21-2003 90826 007 ***150.00

Daytime Phone #

				<u> </u>					
Principal Pla 7750 NW 71 MIAMI FL 331		Mailing Address 7750 NW 71 ST MIAMI FL 33166							
2. Principal	Place of Business	3. Mailing Address	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES				
City & State		City & State	City & State		4. FEI Number 22 - 3876786 Applied For Not Applicable				7
Zip Country		Zip	Country		5. Certificate of Statu	us Desired	8.75 Ad	ditional	1
	6. Name and Address	of Current Registered Agent			7 Name and Addres	ss of New Registered A		3Q	-
				Name 🔿 🗼	1. Manie and Address	O	Jen .		= -
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7750 NW	•		;	Street Address (P.O. Box Number is Not	Acceptable) 48 13	F WN	G L	7
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				City W.		FL	Zip Coo	le	7
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the obliga	tions of registered agent	statement for the purpose of changing	ng its registered o	office or register	ed agent, or both, in the	State of Florida. I am fa	miliar with,	and accept	
						وا ورا			
SIGNATURE	V	\				02 + \u03b4	003		
	Signature, typed or printed name of the	sostered agent and title if applicable.	(NOTE: Registered Ag	ent signature required	when reinstating)	DATE			
F	ILE NOW!! FEE IS \$1	50.00	•						1
•	r May 1, 2003 Fee will be	i i				empaign Financing		May Be	
Make Check	k Payable to Florida Dep	artment of State			Trust Fund	Contribution.	Addeo	to Fees	Ì
10.	OFFI	CERS AND DIRECTORS	11.		ADDITIONS/CHANG	ES TO OFFICERS AND D	DIRECTOR	S IN 11	1
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CITY-ST-ZIP			CITY-ST-2	ZIP					ł
12. I hereby condicated	ertify that the information su on this report or supplemen	pplied with this filling does not qualit tal report is true and accurate and the ustee empowered to execute this re	fy for the exempti hat my signature	on stated in Sec shall have the s	ction 119.07(3)(i), Florida ame legal effect as if ma	a Statutes. I further certify ade under oath; that I am	that the in	formation or director	
or the corp	or an an attachment with a	ustee empowered to execute this re	port as required l	by Chapter 607,	Fiorida Statutes; and th	at my name appears in 8	lock 10 or	Block 11 if	i