FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

03 FEB 25 MM 8:46 SECRETARY OF STATE MALLARY SEE FLORIDA

DOCUMENT # P02000130416

1. Entity Name

TJD STEAKS, INC.

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2. Principal Place 1301-13 Mor	of Business nument Road	3. Mailing Address 1301-13 Mon		-			
Suite, Apr. #, etc.		Sùite, Apt. #, etc		DO NOT WRITE IN THIS S	DO NOT WRITE IN THIS SPACE		
City & State Jacksonville,	FL	City & State Jacksonville, I	-L	4. FEI Number 68-0532489	Applied For		
^{Zip} 32257	Country USA	Zip 32257	Country USA	5. Certificate of Status Desired	Not Applicable 8.75 Additional ee Required		
A growth to the			2000 20 20 10	7. Name and Address of Current Registered			
Sept to the Control of	DO NOT W		Name C	yrus Dossabhoy			
	DO NOT W	7 7		Street Address (P.O. Box Number is Not Acceptable)			
	IN THIS SP	ACE	1301-1				

Jacksonville 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.

200013092342 02/25/03--01051--016 **20 **200.00 SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

	Layanie to Florida Debartment of State					Added to rees
10.	OFFICERS AND DIRECTORS	1177		. Y 4	- g	1 1 12 140 114 114 114 114 114 114 114 114 114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Cyrus Dossabhoy 1301-13 Monument Rd, Jacksonville, FL 32257	TITLE NAME STREET ADDRESS CITY-ST-ZIP				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-STEZIP		IN THIS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		NAME STREET ADDRESS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	rtify that the information supplied with this filing does not qualify for th	TITLE 7. AMME NAME STREET ADDRESS CITY-ST-ZIP				

I nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 10 or on an

SIGNATURE:

ATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Boca Raton Fort Lauderdale Jacksonville Miami Orlando Tallahassee Tampa West Palm Beach

February 23, 2003



www.akerman.com

904 798 3700 tel 904 798 3730 fax

Laura W. Austin, Paralegal 904 598 8617 laustin@akerman.com

VIA FEDERAL EXPRESS

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Re: 2003 Uniform Business Report and Cancellation of Fictitious Name Filing

TJD Steaks, Inc.

Steak-Out

Dear Sir/Madam:

Enclosed for filing is the 2003 Uniform Business Report and this firms check in the amount of \$200.00 for the above referenced corporation. Also enclosed is the cancellation of fictitious name registration for Steak-Out.

Thank you for you immediate attention in filing this report.

Please call me at (904) 598-8617 if you have any questions.

Sincerely,

AKERMAN SENTERFITT

Laura W. Austin, Paralegal