FILED Jul 24, 2003 8:00 am

2003	<b>FOR</b>	<b>PROFIT</b>	CORPORA'	TION
UNIFO	RM B	USINES	REPORT	(UBR)

1. Entity Nam		0007851		Secretary of State 07-24-2003 90112 043 ***150.00					
Principal Place of Business  2881 MADISON ST.  MARIANNA FL 32446  US  Mailing Address  2681 MADISON ST.  MARIANNA FL 32446  US									
4506		3. Mailing Address 4506 Putn	utnam Street		1 10001001 120 10100 11111 00111 00111 00111 00111 00111 10111 10011 10111 10111 10111				
Suite, Apt. #, etc.  Suite, Apt. #, etc.					CHECK HERE IF MAKIN	IG CHANGES			
City & State		Marianna FC			4. FEI Number 59-3151817	No	plied For t Applicable		
Zip	Country	Zip <b>3</b> 2446.	acksor	را	5. Certificate of Status Desired	\$8.75 Add Fee Required	d		
	6. Name and Address of Current	Registered Agent	Name		7. Name and Address of New Registered	I Agent~	<del> · · · · · · · · · · · · · · · · ·</del>		
PEACOCK, MICHAEL A				Street Address (P.O. Box Number is Not Acceptable)					
	NUM STREET				O. Box Hairbor to Hot You oppication				
MARIANN	A FL 32440		City						
					F	<u> </u>			
	named entity submits this statement fo ions of registered agent.	r the purpose of changing its re-	gistered office or re	egistered	d agent, or both, in the State of Florida. I an	n familiar with,	and accept		
SIGNATURE .									
SIGNATURE .	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: R	egistered Agent signature	required w	hen reinstating) DATE				
- After Se	ILE NOW!!! FEE IS \$550.00 ptember 10, 2003 Fee will be \$750 properties to Florida Department of	į.			9. Election Campaign Financing Trust Fund Contribution.		<b>0</b> May Be to Fees		
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS	S IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PEACOCK, MICHAEL 4506 PUTNUM STREET MARIANNA FL 32446	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MISHOE, F. CLARK 5541 HODGESVILLE ROAD DOTHAN AL 36301	Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition		
TITLE, NAME STREET ADDRESS CITY-ST-ZIP	Vicki Husta 4458 Pilcher Ro Marianna FI 32	ad	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u> </u>	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition		

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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

AHaChment

# P9300007851

MADISON'S WAREHOUSE RESTAURANT 2881 MADISON STREET MARIANNA, FLORIDA. 32446

TO WHOM IT MAY CONCERN;

WE RECENTLY RECEIVED A SECOND NOTICE ON CORPORATE UNIFORM BUSINESS REPORT. WE HAVE CHANGED MANAGEMENT AND NEVER FOUND FIRST NOTICE. WE HAVE TAKEN STEPS TO ASSURE THIS NEVER HAPPENS AGAIN BY CHANGING ADDRESS TO OWNER'S HOME. THE PREVIOUS MANAGER NEVER BROUGHT THIS DOCUMENT TO OUR OWNERS ATTENTION.

I AM THE NEW MANAGER AND AS SOON AS I RECEIVED SECOND NOTICE I PROMPTLY TOOK IT TO ACCOUNTANT TO BE HANDLED. I CAN ASSURE YOU THIS WILL NEVER HAPPEN AGAIN. THANK YOU FOR ANY ASSISTANCE YOU CAN GIVE ME.

THANK YOU.

With Husted
VICKI HUSTED.