2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **P93000061708** Sep 18, 2000 8:00 am 1. Entity Name CELEBRITY RESTAURANTS INTERNATIONAL, INC. Secretary of State 09-18-2000 90008 027 ***558.75 Principal Place of Business Mailing Address 2887 BANYAN BLVD CIR 2887 BANYAN BLVD ÇIR **BOCA RATON FL 33431 BOCA RATON FL 33431** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0435215 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent verbook. . Averb**n**ook, Charles J 🔧 -Street Address (P.O. Box Number is Not Acceptable) 2887 BANYAN BLVD CIR **BOCA RATON FL 33431** Zip Code FL 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) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min, will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. Addition CR2E034 (5/00 TITLE Delete TITLE AVERBROOK, CHARLES J Averbook NAME NAME STREET ADDRESS 2887 BANYAN BLVD CIR STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33431** CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete AVERBROOK, DEBORAH NAME 2887 BANYAN BLVD CIR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33431** X Delete TITLE ☐ Change ☐ Addition TITLE **CURTIS, CHRISTIE** NAME NAME STREET ADDRESS 2887 BANYAN BLVD CIR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33431** ☐ Change ☐ Addition TITLE ☐ Delete TITLE LOPEZ, KATHRYN A NAME NAME STREET ADDRESS 7777 GLADES RD, STE 310 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** ☐ Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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:

SIGNATURE RESULTATION OF SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/12/00

561-994-2775

Daytime Phone #