FILED Jun 20, 2002 8:00 am ້ 20ປ2 UNIFORM BUSINESS REPORT (UBR) **Secretary of State** P94000031653 **DOCUMENT #** 06-20-2002 90058 041 ***150.00 RESTAURANT REAL ESTATE MANAGEMENT CORPORATION Principal Place of Business 1601 BELVEDERE RD SUITE 407 SOUTH 1601 BELVEDERE RD SUITE 407 SOUTH WEST PALM BEACH FL 33406 WEST PALM BEACH FL 33406 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 65-0486285 Not Applicable \$8.75 Additional Zip 7ip Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GERSON, GARY N 1645 PALM BEACH LAKES BLVD **SUITE 1200** WEST PALM BEACH FL 33401 Zip Code 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 \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Change ☐ Addition ☐ Delete TITLE METZ, JOHN L. NAME NAME 8008 SOUTH FLAGLER COURT STREET ADDRESS STREET ADDRESS W. PALM BEACH FL CITY-ST-7IP CITY-ST-ZIP ☐ Addition COS TITLE TITLE MEYER, ARTHUR NAME MAME 1601 BELVEDERE ROAD, #407, S STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE ASARCH, GAIL NAME NAME 1601 BELVEDERE ROAD #407 S STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL CITY-ST-ZIP [] Change Addition ☐ Delete TITLE TIPLE NAME MAPLES, PAUL STREET ADDRESS 1601 BELVEDERE ROAD SUITE 407 SOUTH STREET ADDRESS WEST PALM BEACH FL CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition TITLE TITLE Delete NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE 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.



Downent # Downent # P9HWW31653

FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

May 22, 2002

MAY 3 0 2002 RECEIVED

RESTAURANT REAL ESTATE MANAGEMENT CORPORATION 1601 BELVEDERE RD SUITE 407 SOUTH WEST PALM BEACH, FL 33406

Subject: RESTAURANT REAL ESTATE MANAGEMENT CORPORATION

Reference Number: _____ P94000031653__

Please be advised, we have received your annual report/uniform business report; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please sign and return your check submitted with the annual report/uniform business report.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/ml ANNUAL REPORTS SECTION