

FILED

Jul 05, 2001 8:00 am
Secretary of State

07-05-2001 90006 014 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000043229

1. Entity Name
SPORT CHEF, INC.

(LP)

Principal Place of Business Mailing Address
6223 MCINTOSH ROAD, S 6223 MCINTOSH ROAD, S
SARASOTA FL 34238 SARASOTA FL 34238
US US

2. Principal Place of Business 3. Mailing Address
6845 Speedway Blvd P.O. Box 611
Suite, Apt. #, etc. Suite, Apt. #, etc.
Unit K-102 1

City & State City & State
Las Vegas NV Tallahassee, FL
Zip Country Zip Country
89115 34270



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0507759 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
MILLER, BRUCE
4016 CROCKERS LAKE BLVD 424
SARASOTA FL 34238

7. Name and Address of New Registered Agent
Name: Howard Womeldorph
Street Address (P.O. Box Number is Not Acceptable)
7648 Lockwood Ridge Road
City: SARASOTA FL Zip Code: 34243

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] HOWARD WOMELDORPH 4/27/01
Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when releasing) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State
10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GARABEDIAN, THOMAS 4728 ROBINHOOD TRAIL SARASOTA FL 34232 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BRUCE MILLER 4016 CROCKERS LAKE BLVD 424 SARASOTA FL 34238 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 6845 Speedway Blvd. Unit K-102 LAS VEGAS, NV 89115
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CR2E034 (10/00)

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] BRUCE MILLER 4/27/01
Signature and typed or printed name of signing officer or director Date Daytime Phone #