FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90072 024 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000071389 ✓

1. Entity Name
Cheeburger Cheeburger Restaurants, Inc

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
15951 McGregor Blvd	15951 McGregor Blvd.
Suite, Apt. #, etc.: Unit 2A	Suite, Apt. #, etc.: Unit 2A
City & State: Ft. Myers, FL.	City & State: Ft. Myers, FL
Zip: 33908 Country: US	Zip: 33908 Country: US

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0531439 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Keith J. Kanowe

Street Address (P.O. Box Number Is Not Acceptable): 6899 Giralda Circle

City: Boca Raton, FL Zip Code: 33433

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) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P, D Bruce Zicari 15951 McGregor Blvd, Unit 2A Ft. Myers, FL. 33908	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: Bruce Zicari 4/26/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: Bruce Zicari — Date — Daytime Phone #

CR2E034B (12/01)