

APR-30-2002 08:22 FROM UTCHER FINANCIAL SERVICES TO
**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P95000082860
1. Entity Name
FLYERS WINGS & GRILL, INC

671781

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2. Principal Place of Business
5621 WEST COLONIAL DR
State, Apt. #, etc.
City & State:
ORLANDO FLORIDA
Zip Country
32808-7613 ORANGE

3. Mailing Address
State, Apt. #, etc.
City & State
4. FEI Number
59-3340661
Applied For
Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent
Name
MILLIE MATTIOLI
Street Address (P.O. Box Number is Not Acceptable)
5621 WEST COLONIAL DRIVE
City State Zip Code
ORLANDO FL 32808

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: *Frank Mattioli* DATE: **04-30-02**
(NOTE: Registered Agent Signature required when re-registering)

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-STATE-ZIP	P/V MATTIOLI, MILLIE 5621 WEST COLONIAL DRIVE ORLANDO, FL 32808-7613
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	T/S MATTIOLI, FRANK 5621 WEST COLONIAL DRIVE ORLANDO, FL 32808-7613
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TITLE NAME STREET ADDRESS CITY-STATE-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)(b), 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: *Frank Mattioli* DATE: **04-30-02**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR