

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 07, 2003 8:00 am**  
**Secretary of State**

04-07-2003 91016 044 \*\*\*150.00

UBR0303 AV1

**DOCUMENT # P96000057420**

1. Entity Name  
**EMERIL'S OF ORLANDO, INC.**



Principal Place of Business  
**6000 UNIVERSAL BLVD  
#702  
ORLANDO FL 32819  
US**

Mailing Address  
**1253 PARK STREET  
CLEARWATER FL 33756**



2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent  
**RICE, CYNTHIA I ESQ  
1253 PARK STREET  
CLEARWATER FL 33756**

4. FEI Number **72-1408490**  
Applied For  
 Not Applicable

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

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>M LAGASSE, EMERIL J 638 CAMP ST NEW ORLEANS LA 70130</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>M LAGASSE, EMERIL J. 829 ST. CHARLES AVE. NEW ORLEANS, LA 70130</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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

**03-08-03** **504 524-4241**  
Date Daytime Phone #

CR2E034 (10/02)

ATTACHMENT

80073557

LAW OFFICES  
RICHARDS, GILKEY, FITE, SLAUGHTER, PRATESI & WARD, P.A.  
RICHARDS BUILDING  
1253 PARK STREET  
CLEARWATER, FLORIDA 33756

RALPH RICHARDS (1893-1980)  
JOHN D. FITE (1933-2000)  
JOHN E. SLAUGHTER, JR.  
EMIL G. PRATESI  
R. CARLTON WARD  
CYNTHIA I. RICE  
THEO J. KARAPHILLIS

TEL: (727) 443-3281  
FAX: (727) 446-3741

OF COUNSEL  
WILLIAM W. GILKEY  
WILLIAM M. MACKENZIE  
PATRICK W. RINARD

April 4, 2003

Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

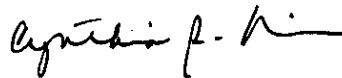
Re: Emeril's of Orlando, Inc.  
Document #P96000057420

Dear Gentlemen:

Enclosed please find the following:

1. Executed 2003 For Profit Corporation Uniform Business Report; and
2. Check #015942 in the amount of \$150.00 representing the filing fee for the UBR.

Very truly yours,



Cynthia I. Rice

CIR/ker  
Enclosures