2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 16, 2002
Secretary of State

DOCUMENT# P97000000899

Entity Name: C.A. ENGLUND'S DELI, INC.

Current Principal Place of Business:

50 PINE ISLAND ROAD
N FT MYERS, FL 33903

New Principal Place of Business:

50 PINE ISLAND ROAD
SUITE8
N FT MYERS, FL 33903

Current Mailing Address:

50 PINE ISLAND ROAD
N FT MYERS, FL 33903

New Mailing Address:

50 PINE ISLAND ROAD
SUITE8
N FT MYERS, FL 33903

FEI Number: 65-0728658 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ENGLUND, CARL
50 PINE ISLAND ROAD
N FT MYERS, FL 33903 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: ENGLUND, CARL
Address: 1633 DANIELS DRIVE
City-St-Zip: N FT MYERS, FL 33917

Title: D ( ) Delete
Name: ENGLUND, CAROL
Address: 1633 DANIELS DRIVE
City-St-Zip: N FT MYERS, FL 33917

Title: MD ( ) Delete
Name: ENGLUND, CURT
Address: 160 BROOKS RD
City-St-Zip: FORT MYERS, FL 33917

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROL R. ENGLUND D 09/16/2002

Electronic Signature of Signing Officer or Director — Date