

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000065235

1. Entity Name

MARTNI RESTAURANTS, INC.

FILED

May 02, 2001 8:00 am
Secretary of State

05-02-2001 90106 015 ***150.00

Principal Place of Business

Mailing Address

5401 KIRKMAN ROAD
SUITE 725
ORLANDO FL 32819

5401 KIRKMAN ROAD
SUITE 725
ORLANDO FL 32819

2. Principal Place of Business

3. Mailing Address

5728 MAJOR Blvd

5728 MAJOR Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 601

Suite 601

City & State

City & State

Orlando FL

Orlando FL

Zip

Country

Zip

Country

32819

US

32819

US

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KHATIB, RASHID A
5401 KIRKMAN ROAD
SUITE 725
ORLANDO FL 32819

Name

Street Address (P.O. Box Number is Not Acceptable)

5728 MAJOR BLVD., STE. 601

City ORLANDO FL 32819

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.

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) ☐

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	CD KHOURI, ZAH W 5401 KIRKMAN RD, STE 725 ORLANDO FL 32819	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KHATIB, RASHID A 5401 KIRKMAN RD, STE 725 ORLANDO FL 32819	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KHATIB, ATEF A 5401 KIRKMAN RD, STE 725 ORLANDO FL 32819	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HODGE, RANDELL R 5401 KIRKMAN RD, STE 725 ORLANDO FL 32819	<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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5728 MAJOR BLVD., STE. 601 ORLANDO FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition PSTD 5728 MAJOR BLVD., STE. 601 ORLANDO FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5728 MAJOR BLVD., STE. 601 ORLANDO FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition VPD 5728 MAJOR BLVD., STE. 601 ORLANDO FL 32819
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

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: Rashid A Khatib President 4/16/01 (407) 354-2200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)