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

## P97000065235 DOCUMENT #

1. Entity Name

MARTNI RESTAURANTS, INC.



Apr 30, 2003 8:00 am Secretary of State
04-30-2003 90117 015 \*\*\*150.00 **FILED** 

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Principal Place of Business 5728 MAJOR BLVD STE 601 ORLANDO FL 32819 US 2. Principal Place of Business			Mailing Address 5728 MAJOR BLVD STE 601 ORLANDO FL 32819 US 3. Mailing Address									
z. i micipari	IACE OF DUSIE	1000	5. Mailing Address									
Suite, Apt.	#, etc.		Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES				
City & Stat	e		City & State				4.	4. FEI Number 59-3459579 Applied For Not Applicable				
Zip Country			Zip	Zip Cour			5.	5. Certificate of Status Desired   \$8.75 Additional Fee Required				
	6. Name	and Address of Current	Register	ed Agent			7.	Name and Address of New Re	gistered A	gent		
						Name						
KHATIB, RASHID A 5728 MAJOR BLVD				Street Address			ess (P.O.	P.O. Box Number is Not Acceptable)				
STE 601												
ORLANDO FL 32819						City		<u></u>	FL	Zip Cod	e	
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  Signature, typed or printed name of registered agent and title if applicable. (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 Fina Trust Fund Contribution.			May Be to Fees	
10. OFFICERS AND D				DIRECTORS 11.			A	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
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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:

SIZIGATURE REQUISIRAShid A. Khatib 4-18-03

407-354-2200

Daytime Phone #