

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 16, 2000 8:00 am**  
**Secretary of State**

05-16-2000 90790 012 \*\*\*150.00

**DOCUMENT # P98000069971**

1. Entity Name  
**SHB-BBQ KENDALL CORPORATION**

Principal Place of Business <del>150 WEST FLAGLER STREET-</del> <del>SUITE 2200-</del> <del>MIAMI FL 33130-</del>	Mailing Address <del>150 WEST FLAGLER STREET-</del> <del>SUITE 2200-</del> <del>MIAMI FL 33130-1536-</del>
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2. Principal Place of Business <b>4862 NW 109 Place</b>	3. Mailing Address <b>4862 NW 109 Place</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State <b>Miami, FL</b>	City & State <b>Miami, FL</b>
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Zip <b>33178</b>	Country <b>U.S.</b>	Zip <b>33178</b>	Country <b>U.S.</b>
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4. FEI Number <b>65-0866856</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired  **\$8.75 Additional Fee Required**



DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

~~FREED, OWEN S~~  
~~150 WEST FLAGLER STREET~~  
~~SUITE 2200~~  
~~MIAMI FL 33130~~

Name  
**Mr. Roy Cox**  
 Street Address (P.O. Box Number is Not Acceptable)  
**4862 NW 109 Place**  
 City  
**Miami** **FL** Zip Code  
**33178**

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 04-27-00  
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, 2000 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	DP COX, ROY JR <del>1152 S.W. 93RD LANE-</del> <del>MIAMI FL 33186-</del> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4862 NW 109 Place Miami, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S COX, CARLA A <del>150 WEST FLAGLER STREET, #2200-</del> <del>MIAMI FL 33130-</del> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4862 NW 109 Place Miami, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS FREED, OWEN S SUITE 2200, 150 W. FLAGLER ST. MIAMI FL 33130 <input checked="" type="checkbox"/> Delete	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"/> Delete	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"/> Delete	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"/> Delete	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: **Roy Cox Jr.** 04-27-00 (305) 408-4666  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)