2000 UNIFORM BUSINESS REPORT (UBR) FILED Aug 17, 2000 8:00 am Secretary of State DOCUMENT # **P99000074321** 1. Entity Name RESTAURANT, SYSTEMS UNLIMITED, INC. 06-12-2000 90039 038 ***150.00 Principal Place of Business Mailing Address HAULOVER MARINA CENTER 10205 COLLINS AVENUE 15000 COLLINS AVE SUITE 502 BAL HARBOUR FL 33154-1427 MIAMI BEACH FL 33154 2. Principal Place of Business 3. Mailing Address 15000 COLLINS AVE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0942445 BEALH MIAM! Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired DADG Fee Required 331SY 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SPILBER SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 15000 COLLINS AVE HAULOVER MARINA 343 ALMERIA AVENUE COLLINS CORAL GABLES FL 33134 Zip Code 33/5 submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida 8. The above named er SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PD ☐ Channe ☐ Addition TITLE TITLE ☐ Delete SPILBERG, ALISA R NAME NAME STREET ADDRESS 15000 COLLINS AVENUE HAULOVER MARINA CENTE STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33154 CITY-ST-ZIP ☐ Addition Delete Change TITLE SPILBERG, SCOTT M NAME NAME STREET ADDRESS 15000 COLLINS AVENUE HAULOVER MARINA CENTE STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33154 CITY-ST-ZIP Change ☐ Addition FISHBEIN, CHARLES V NAME NAME 15000 COLLINS AVENUE HAULOVER MARINA CENTE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33154 CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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 pr 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 of the corporation or the received

19616

July 27, 2000

FLORIDA DEPARTMENT OF STATE Division of Corporations

RE: P99000074321 RESTAURANT SYSTEM UNLIMITED, INC. 2000 UNIFORM BUSINESS REPORT /WITH PAYMENT SENT 04/15/00

Dear sir:

I have attached herewith the second notice of the 2000 Uniform Business Report as per your recommendation with my explanation as follows: You have received our check therefore; payment has been made on this account for the \$150.00. No payment is due as this time. Please be advised that the first 2000 Business Report with payment was sent on time on the 05/01/00 deadline.

Thank you in advance for the incovenience.

Scott Spielberg Vice President

Scott-Spilley