Uniform Commercial Code — Statement of Continuation, Release, Amendment, Etc. — Form UCC-2

1. Type form, 2, if space is inadequate continue on additional sheet, 3. Enclose filing fee,

4. Filings in the Secretary of State's Office must contain either the debtor's federal employer identification number or social security number.

				Prepaid account number 22543
		Debtor (if individual,	last name fi	rst) and address:
Paradise, Inc.				
dba Paradise Caf 728 Massachusett				
Lawrence, KS 66				
Lawrence, K5 00				
:N	or SSN	FEIN		or SSN
				For filing officer
Secured Party and address (Type Information Inside	(there may be more than one): de gray area)			
Mercantile Bank of				FILED
formerly known as			DOUGLAS COUNTY KANSAS	
The First National Bank of Lawrence P.O. Box 428				
Lawrence, Ks 66044			1994	MAY -5 PM 1: 39
			DEC	E NEUSTIFTER
Assignee and address if applicable			INLO	ISTER OF DEEDS
				0000444
				9008640
	00107			6/00/80 DC Co
This statement refers to Orig	ginal Financing Statement Number: 00104	Origina Origina	al filing date	6/09/89 Filed with DG Co
X A. Continuation	The original Financing Statement bearing the above file number is still effective.	D. Ass	Ignment	The Secured Party of record has assigne the Secured Party's rights in the property described below under the Financing
B. Termination	The secured Party of record no longer claims a security interest under the Financing Statement bearing the above file number.			Statement bearing the above file number to the Assignee whose name and address are shown above.
		E. Ame	endment	The Financing Statement bearing the
C. Release	From the Collateral described in the Financing Statement bearing the above file number, the Secured Party of record releases the collateral belo			above file number is amended as set forti below.
This area is for describing of	hanges.			
		Ņi	umber of Ade	ditional Sheets, if any.
		J. Rombough,	CLA	