STREET ADDRESS

SIGNATURE:

14. Thereby certify that the information sindicated on this annual report of selection of the corporated Block 12 or Block 13 if changes, or

CITY-ST-ZIP

FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Mar 24 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # K07571 (8) BUD'S CHICKEN AND SEAFOODS OF MARGATE, INC. Principal Place of Business Mailing Address 518 INDUSTRIAL AVENUE 518 INDUSTRIAL AVENUE DO NOT WRITE IN THIS SPACE **BOYNTON BEACH FL 33426 BOYNTON BEACH FL 33426** 3. Date Incorporated or Qualified 12/17/1987 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0015279 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees Ζιp Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

10. Name and Address of New Registered Agent 24 25 29 9. Name and Address of Current Registered Agent 81 Name BRINKMAN, MICHAEL A. **518 INDUSTRIAL AVENUE** 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 12 83 **BOYNTON BEACH FL 33426** 84 City Zip Code FL 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstaling) 12. OFFICERS AND DIRI CTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE TITLE BRINKMAN, DOROTHY B. NAME 1.2 NAME CR2E034 827 SOUTH ROAD STREET ADDRESS 1.3 STREET ADDRESS **BOYNTON BEACH FL** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 21 TITLE Addition TITLE BRINKMAN, MARK D. NAME 2.2 NAME 12662 GUILFORD CIRCLE STREET ADDRESS 2.3 STREET ADDRESS WEST PALM BEACH FL CITY - ST - ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 31 TITLE BRINKMAN, MICHAEL A. 3.2 NAME NAME 957 ISLES ROAD STREET ADDRESS 3.3 STREET ADDRESS **BOYNTON BEACH FL** 3.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change ■ Addition BRINKMAN, THOMAS P. NAME 4. 2 NAME 3987 VICTORIA DRIVE STREET ADDRESS 4.3 STREET ADDRESS WEST PALM BEACH FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CHTY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME

63 STREET ADDRESS

his filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information usual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an injury steep approvered to execute this report as required by Chipter 607, Florida Statutes; and that my name appears in

6.4 CiTY-ST-ZiP