

Jun 02 1998 8:00am
Secretary of State

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 19967		FLORIDA DEPARTMENT OF STATE Sandra B. Monahan Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P23248
 1. Corporation Name
Kentucky Fried Chicken International Corp.

Principal Place of Business 1209 Orange St Wilmington, DE 19801	Mailing Address 1209 Orange St Wilmington, DE 19801
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2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc	2b. Suite, Apt. #, etc
22. City & State	2c. City & State
23. Zip	2d. Zip
24. Country	2e. Country

3. Date incorporated or Qualified 3/3/89	3a. Date of Last Report 1996
4. Federal Employer ID No. 61-1128364	Added For No. Additional
5. Certificate of Status Dropped	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contributor	\$5.00 May Be Added to Fees
7. This corporation has liability for Federal tax under 1393D	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

8. Name and Address of Current Registered Agent
**CT Corporation System
 1200 S Pine Island Road
 Plantation, FL 33324**

10. Name and Address of New Registered Agent
81. Name
82. Street Address IP
83. City
84. State
85. Zip

11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation, through this document, has authorized the undersigned to change its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors through a resolution adopted on 05/28/98 and agent I am familiar with, and accept the obligations of Section 607 0505, Florida Statutes.

SIGNATURE _____ Signature typed or printed name of registered agent and file reference

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		1.2 NAME	President
STREET ADDRESS		1.3 STREET ADDRESS	Peter A. Bassi
CITY, ST, ZIP		1.4 CITY, ST, ZIP	14841 Dallas PKWY, Dallas TX 75252
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	Vice-President
STREET ADDRESS		2.3 STREET ADDRESS	David J. Deng
CITY, ST, ZIP		2.4 CITY, ST, ZIP	14841 Dallas PKWY, Dallas TX 75252
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	Treasurer
STREET ADDRESS		3.3 STREET ADDRESS	James Derouin
CITY, ST, ZIP		3.4 CITY, ST, ZIP	14841 Dallas PKWY, Dallas TX 75252
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

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 -06/12/98-01027-008
 ***225.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: James Derouin **4/28/98**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR

CR2E034 (12/95)