

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2000 8:00 am
Secretary of State

05-11-2000 90331 001 ***300.00

DOCUMENT # P35593

1. Entity Name

RARE HOSPITALITY INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

8215 ROSWELL RD.
 BUILDING 200.
 ATLANTA GA 30350

8215 ROSWELL RD.
 BUILDING 200.
 ATLANTA GA 30350-6445

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Building 600

Building 600

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

58-1498312

Applied For

Not Applicable

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

TERMINELLO, NANCY
2700 S.W. 37TH AVENUE
MIAMI FL 33133

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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 **PCOO** Delete
 NAME **HICKEY JR, PHILIP J**
 STREET ADDRESS **8215 ROSWELL RD BLDG 200**
 CITY-ST-ZIP **ATLANTA GA 30350**

TITLE **PCEO Sole Director** Change Addition
 NAME **Hickey, Jr., Philip J.**
 STREET ADDRESS **8215 Roswell Road, Building 600**
 CITY-ST-ZIP **Atlanta, GA 30350**

TITLE **C** Delete
 NAME **MCKERROW, GEORGE W., JR.**
 STREET ADDRESS **8215 ROSWELL RD. BLDG 200**
 CITY-ST-ZIP **ATLANTA GA 30350**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **CFO** Delete
 NAME **BENN, W DOUGLAS**
 STREET ADDRESS **8215 ROSWELL RD BLDG 200**
 CITY-ST-ZIP **ATLANTA GA 30350**

TITLE **TCFO** Change Addition
 NAME **Benn, W. Douglas**
 STREET ADDRESS **8215 Roswell Road, Building 200**
 CITY-ST-ZIP **Atlanta, GA 30350**

TITLE **V** Delete
 NAME **BURNETT, WILLIAM**
 STREET ADDRESS **8215 ROSWELL RD. BLDG 200**
 CITY-ST-ZIP **ATLANTA GA 30350**

TITLE **VS** Change Addition
 NAME **Johnson, JJoia M.**
 STREET ADDRESS **8215 Roswell Road, Building 600**
 CITY-ST-ZIP **Atlanta, GA 30350**

TITLE **D** Delete
 NAME **MCKERROW, GEORGE SR.**
 STREET ADDRESS **8215 ROSWELL RD. BLDG 200**
 CITY-ST-ZIP **ATLANTA GA 30350**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **SAN MARTIN, RONALD W**
 STREET ADDRESS **8215 ROSWELL RD BLDG 200**
 CITY-ST-ZIP **ATLANTA GA 30350**

TITLE Change Addition
 NAME
 STREET ADDRESS
 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 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:

Joa M. Johnson
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Joa M. Johnson, Vice-President and Secretary

April 26, 2000

770-551-5469

Date

Daytime Phone #

CF2E034 (9/99)