Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90229 030 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000091826

1. Corporation Name

TACO CALIENTE RE, INC.

Principal Place	e of Business	Mailing Address			T IMBERME LINE LAUFE MILLE ABUTE BREEF BRITE.	<b>BOTTR TOTAL FEBRUAR</b> FOLLOW FE	BS & BILL 4004
4288 BONITA BEACH ROAD		4288 BONITA BEACH ROAD					
BONITA SPRINGS FL 34134		BONITA SPRINGS FL 34134		DO NOT WRITE IN	TUIC CDACE		
					3. Date Incorporated or Qualifed	INIO OFACE	
					11/04/1996		l
2 Principal D	lace of Business	2a. Mailing Address	<del></del>		4. FEI Number	App	lied For
<del>-</del> '	lace of business	26		65-0703790	<del> </del>	Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Ac		
22		27		5. Certifcate of Status Desired	Fee Req	uired	
City & State	е	City & State		6. Election Campaign Financing	\$5.00 N	/lay Be	
23				Trust Fund Contribution	Added to	Fees	
Zip	Country	Zip Country		8. This corporation owes the current year			
24	25	29 30			Personal Property Tax.	Yes	No
	9. Name and Address of Current	Registered Agent	-	L	10. Name and Address of New Registe	red Agent	
ENN	IS, PETER		81	Name	,		
	BONITA BEACH ROAD			Street Add	Street Address (P.O. Box Number is Not Acceptable)		
BONITA SPRINGS FL 34134			02			<u> </u>	
0014	IIIA GENINGO I E GYIGY		83				
	•		84	City		FL 85 Zip Ci	ode
44.5	4- 4	and 607 1509 Florida Statutos th	a about	a named con	poration submits this statement for the purpor		egistered
office or n	egistered agent, or both, in the State o m familiar with, and accept the obligati Signature, typed or printed name of registered agent	ons of, Section 607.0505, Florida S	ized by Statutes	the corporati	ion's board of directors. I hereby accept the a	ppointment as regi	istered
12.				,	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTOR	RS IN 12
TITLE			1.1 TITLE			Change	Addition
NAME	ENNIS, PETER	PETER 1.2 N		İ			i
STREET ADDRESS			1.3 STREET ADDRESS				
CITY-ST-ZIP	BOLUET 0000100 EL 00000		1.4 CITY-S	T-ZìP			
TITLE			2.1 TITLE		······································	☐ Change	Addition
NAME	SCHONDER, RICHARD 22N		2.2 NAME				
STREET ADDRESS	27969 TEMPLE TERRACE DR 238		2.3 STREET	TADDRESS			
CITY-ST-ZIP			2. 4 CITY- 9	T-ZIP			
TITLE	**		3.1 TITLE			Change .	Addition
NAME	CANDA CANA		3.2 NAME	İ		·	J
STREET ADDRESS			3.3 STREET	F ADDRESS		•	ļ
CITY-ST-ZIP			3.4. CITY-S	T-ZIP			
TITLE	<del></del>		4.1 TITLE			☐ Change	Addition
NAME	,		4. 2 NAME				
STREET ADDRESS				ADDRESS			ļ
CJTY-ST-ZIP			4.4 CITY-S	T-ZIP		☐ Change	☐ Addition
TITLE	,		5.1 TITLE			∵ Cuange	☐ Magagarii
NAME			5.2 NAME	LADDDESS	• •		
STREET ADDRESS			3.3 3 IKEE	TADDRESS			
CITY-ST-ZIP	l .	■.	EACITY O	T. 7ID			
TITLE			5.4 CITY-S' 6.1 TITLE	T-ZIP		Change	Addition

City-ST-ZIP 14. 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 annual report of 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, with an other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE

NAME

STREET ADDRESS