FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Feb 26 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998. DOCUMENT # P97000021121 (3) A PERSIAN BISTRO, INC. Principal Place of Business Mailing Address 847 VANDERBILT BEACH RD. 847 VANDERBILT BEACH RD. NAPLES FL 34108 NAPLES FL 34108 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified **2** 03/05/1997 2. Principal Place of Business 2a. Mailing Address Applied For 52-2022547 17 YANERBILT BU Not Applicable Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired P.O. BOX Fee Required \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes ☐ No Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name WOLFE, LARRY 200-A JOHN KNOX ROAD Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32303-6643 83 84 City 85 Zip Code 11. Pursuant to the provisions of office or registered agent, agent. I am familiar with and forida Statutes, the above-named corporation submits this statement for the purpose of changing its registered thange was authorized by the corporation's board of directors. I hereby accept the appointment as registered 607.0505, Florida Statutes. MICHAEL SIGNATURE DATE OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change / TITLE 11TITLE MIR, MICHAEL 1 2 NAME NAME 847 VANDERBILT BEACH RD. 1.3 STREET ADDRESS STREET ADDRESS NAPLES FL 34108 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 21 TITLE Change TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change TITLE 3.1 TITLE NAME 32 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS

6 4 CITY-ST-2IP CITY-ST-ZIP 14. I horeby certify that the information supplied with this filing doc indicated on this annual roport or supplemental annual report officer or director of the corporation or the receiver or fursted in Block 12 or Block 13 if changed, or on an attachment with place. po not qualify for the exemption s the rue and accurate and that my empowered to execute this report address. on 119.07(3)(i), Florida Statutes. I further certify that the Information fall have the same legal effect as if made under oath; that I am an by Chapter 607, Florida Statutes; and that my name appears in ignature s as require

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