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**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K79685

(9)

1. Corporation Name

KARL'S RESTAURANT, INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/12/1989	3a. Date of Last Report 03/28/1994
4. FEI Number 59-2960034	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business 4015 S. DALE MABRY HWY. TAMPA FL 33611	2a. Mailing Address 4015 S. DALE MABRY HWY. TAMPA FL 33611
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent

**PHILLIPS, GEORGE W.
8001 N. DALE MABRY HWY.
TAMPA FL 33614**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	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. I hereby accept the appointment as registered 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 title if applicable

(NOTE: Registered Agent signature required when registering)

(N/A)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	PHILLIPS, GEORGE W.	1.2 NAME	
STREET ADDRESS	8001 N. DALE MABRY HWY.	1.3 STREET ADDRESS	
CITY - ST - ZIP	TAMPA FL	1.4 CITY - ST - ZIP	
TITLE	P	2.1 TITLE	☒ Change ☐ Addition
NAME	STEELE, JUNE	2.2 NAME	
STREET ADDRESS	3807 S. CHURCH ST.	2.3 STREET ADDRESS	201 W. Laurel St., #307
CITY - ST - ZIP	TAMPA FL	2.4 CITY - ST - ZIP	Tampa, FL 33602
TITLE	VP	3.1 TITLE	☐ Change ☒ Addition
NAME	INNOCENTI, JULIANNE	3.2 NAME	Reynolds, Chaiyaporn
STREET ADDRESS	3010 BAY VISTA	3.3 STREET ADDRESS	3704 W. Oklahoma Ave.
CITY - ST - ZIP	TAMPA FL	3.4 CITY - ST - ZIP	Tampa, FL 33611
TITLE	S	4.1 TITLE	☒ Change ☐ Addition
NAME	STEELE, EUGENE	4.2 NAME	
STREET ADDRESS	3807 S. CHURCH ST.	4.3 STREET ADDRESS	201 W. Laurel St., #307
CITY - ST - ZIP	TAMPA FL	4.4 CITY - ST - ZIP	Tampa, FL 33602
TITLE	T	5.1 TITLE	☐ Change ☒ Addition
NAME	STEELE, WILSON	5.2 NAME	Steele, Eugene
STREET ADDRESS	3807 S. CHURCH ST.	5.3 STREET ADDRESS	201 W. Laurel St., #307
CITY - ST - ZIP	TAMPA FL	5.4 CITY - ST - ZIP	Tampa, FL 33602
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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 199.032(1)(b), 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 addition.

SIGNATURE:

Eugene Steele

Eugene Steele

2-22-95

(813) 837-2148

PRINT NAME AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sec - Treas

(N/A)

(Signature Required)