

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

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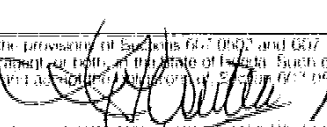
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

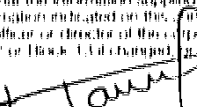
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DO NOT WRITE IN THIS SPACE

CORPORATION ANNUAL REPORT 1995		 FLORIDA DEPARTMENT OF STATE Sandra B. Murphree Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P94000090375 (4)			
1. Corporation Name 22 RESTAURANT, INC.			
Principal Place of Business 2200 NW 22ND AVE MIAMI FL 33142		Mailing Address 2200 NW 22ND AVE MIAMI FL 33142	
2. Principal Place of Business 21 1036 S.W. 1 ST.		2a. Mailing Address 26 State Apt # etc.	
22 City & State 23 MIAMI FLA.		27 City & State 28	
24 33130 25 US.		29 30	
9. Name and Address of Current Registered Agent FLORIDA ANNUAL REPORT SERVICE 1036 SW FIRST ST MIAMI FL 33130			
10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code			
11. Pursuant to the provisions of Sections 607.0802 and 607.0804 Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registers (insert or both) of 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 acknowledge the contents of Section 607.0804 Florida Statutes. SIGNATURE:  AMADA C. LOPEZ, PRES. 4/27/95			
12. OFFICERS AND DIRECTORS 13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN '92			
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(2)(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 is a new addition with an address.		15. 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(2)(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 is a new addition with an address.	

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAVIER E OBREGON