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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

L50642 **DOCUMENT #**

(2)

36 STREET RESTAURANT, INC.

PPROVED AND FILED

or 121 3410:53



Principal Place	of Business	Mailing Address		T MENTERN DET ESTAT DESIGNE BILLI DIN	ien bibi dinit nikte ninti gekit ninti ninti (kni
7951 SW 6TH 5310 NW 33 PLANTATION	AVE #119	7961 SW 6TH ST. # 5310 NW 33 AVE # PLANTATION FL 333	119		
				3. Date Incorporated or Qualified 02/08/1990	3a. Date of Last Report 04/17/1995
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26	····	65-0173230	Not Applicable
Suite, Apt. (22	#, @IC.	Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State)	City & State		6. Election Campaign Financing	□ \$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Ζφ 29]	Country 30	8. This corporation has liability fo Florida Statutes	rintangible tax under si 199 032 si 🎞 No
	g. Name and Address of Cu			10. Name and Address of New	
			81 Name		
LEVINE,	BRUCE M.		82 Street	CORPORATION SERVIC Address (P.O. Box Number is Not Accepta	CE COMPANY
	N 33 AVE			1201 HAYS STREET	
SUITE 1			83		
FT LAU	DERDALE FL 33309		84 City		85 Zip Code
11 Duramont t	to the recide and of Post and CO7.	0600 224 607 1600 11422 014		TALLAHASSEE corporation submits this statement for the pi	FL 32301
or register	ed agent, or both, in the State of	Florida, Such change was autho	rized by the corporation's	supportation subtrivits this statement for the pr s board of directors. Thereby accept the ap	urpose of changing its registered office pointment as registered agent. I am
- 1	th and accept the obligations of		es. 'S AGENT	MADOU	1000
SIGNATURE	Significate Typed or printed manie of registerical		NOTE: Brighten Agent signar in	MARCH 2	20, <u>1996</u>
12.	OFFICERS	AND DIRECTORS	13.		FICERS AND DIRECTORS IN 12
TITLE	D crown	☐ Dél€TE	1 1 Till_F		Change Addition
NAME	MCDONALD, GERALD T. 7951 SW 6TH STREET #	140	1.2 NAME		
STREET ADDRESS	PLANTATION, FL 33324	112	1.3 STREET ADOPESS		
CITY-ST-ZIP TITLE	FLANTATION, FL 33324	DELETE	1.4 CITY-ST ZIP 2.1 TITLE		Change Addition
NAME			2 2 NAME	" g k" g gm"g	
STREET ADDRESS			2.3 STREET ADDRESS		0.001 3 3 1 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9
CITY-ST-ZIP			2 4 CITY - ST - ZIP		27,00 m###228.06
TITLE		☐ DELETE	3 1 TH LE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREE! ADDRESS		
CITY - ST - ZIP	• • • • • • • • • • • • • • • • • • • •	C) DELETE	3.4 CHY ST-ZIP		
TITLE		☐ DELETE	4.1 HILE		Change Addition
NAME STREET ADDRESS			4.2 NAME		
CITY - ST - ZIP			4.3 STREE! ACORESS		
TITLE		☐ DELETE	4.4 CITY - ST - 7IP 5.1 TILLE		Change Addition
NAME		_	5.2 NAME		
STREET ADDRESS			5.3 STHEET ADDRESS		
CITY-ST-ZIP		 <u></u>	5 4 CITY - S' - Z-P'		
TITLE		DELETE	6 1 H/LF		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS	1	
CHY-ST-ZIP			6 4 CITY - ST - 7:P		

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this armual 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 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-16-96 (954)475-8332

CR2E034 (12/95)