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

PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P25319

(5)

YAYA'S FLAME BROILED CHICKEN, INC.

FILED
Apr 29 1997 8:00am
Secretary of State

, mopartio	0 01 00311033	Mailing Address					1							
521 80 DORT FLINT MI 48503 US		521 S. DORT HWY. FLINT MI 48503-2848 US												
••								Date Incorporated of 07/25/1989	or Qualified	ied 3a. Date of Last Report 03/15/1996				
	lace of Business	2a. Mailing Address	2a. Mailing Address					FEI Number		-L		1	lied For	
21		[26]						38-2864998					Applicable	
Suite, Apt.		Suite, Apt. #, etc.					5.	Certificate of Status	Desired	\$8.75 Additional Fee Required				
City & State	9	City & State					6.	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees						
Zip 24	Country 25	Zφ Coυ 29 30			У		8. This corporation has liability for intangible tax Florida Statutes Yes N							
	9. Name and Address of Curre						10.	Name and Address						
	EN, MICHAEL			81	N	ame								
	2ND AVE., SOUTH TE 701			82	Si	reet A	Address (F	P.O. Box Number is N	lot Acceptab	le)				
ST. (PETERSBURG FL 33731			83	1									
record de Marie Carine	ewika Kalangara			84	С	ity		***************************************		FL	85	Žip Ce	ode	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statu	ites, the a	δον	e-na	med ¢	corporatio	n submits this staten	nent for the p	urpose of	changii	ng its	registered	
ation of a	to the provisions of Sactions 607.050 epistered agent, or both, in the State of familiar with, and accept the oblig	of Florida. Such change was allons of, Section 607.0505. F	.authorize Torida Stat	d by tutes	y Ine s	coroc	poration's l	poard of directors. I h	ereby accep	t the app	ointmen	t as re	egistered	
SIGNATURE	, -													
	Signature, typed or printed name of registered agr		III : Rogistere	d Ag	ont sig	nature re				DATE				
12. TITLE	PTD OFFICERS AN	ID DIRECTORS	13. 1.1 11	1111				ADDITIONS/CHANGI	S TO OFFIC	ERS AND	DIREC Char		IN 12 Addition	
NAME	CHINONIS, JOHN D.	perent	1.2 N								L. J Cilai	iye	AOURION	
STREET ADDRESS	6009 PLANTATION				i addi	жес								
CITY-ST-ZIP	GRAND BLANC MI				ST-716									
TITLE	VSD	DELETE	2.1 10		J 7 2 11					•	Char	106	Addition	
NAME	CHINONIS, GUS C.		2.2 N	AME								-		
STREET ADDRESS	9581 BURNING TREE DRIVE		2.3 S1	TRECT	1 ADDI	₹LSS			141				İ	
CITY-ST-ZIP	GRAND BLANC MI		2 4 0	HY-S	S1 - 71	þ								
TITLE		☐ DELF1E	3.1 11	iite			2001				☐ Char	nge	Addition	
NAME			3.2 N/	AME										
STREET ADDRESS			3.3 Si	TREFT	LADDI	RESS								
CITY-ST-ZIP		T organ	34.0		SI-Z	>			~~~~					
TITLE		☐ DELETE	4 1 Th								L Char	ige	Addition	
NAME			4 2 N											
STREET ADDRESS			4 3 S1			1								
CITY-ST-ZIP TITLE		☐ DELETE	4.4 Ct 5.1 Tt		ST - ZIF	<u>'</u>					Char	nne	Addition	
NAME		LLI Dettert	5.2 N/									igo	L YOURION	
STREET ADDRESS			5.3 \$1		Anna	2238								
CITY-ST-ZIP			5.4 01											
TITLE		DELETE	6.1 Tr		411	$-\dagger$					Char		Addition	
NAME			6.2 NA									*	·	
STREET ADDRESS			6.3 ST		ADDE	RESS								
CITY-ST-ZIP			6.4 CI											
	ov certify that the information supplie	d with this filing does not qual					ated in Sc	ction 119 07/3\/i) Eld	rida Statutes	Lfurthor	cortify t	hal th	<u></u>	

I do need by certify that the information supplied with rits filing coes for quality for the exemption stated in Section 119.0/(3)(i), 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 address.

CIONATURE.

4-23-97

(810) 735-6550