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

PROFIT CORPORATION **ANNUAL REPORT**

1997

FOOD SPOT #25, INC.

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 408625

Mailing Address

(2)

FILED May 09 1997 8:00am Secretary of State



7601 LUDLAM RD 60 MIAMI FL 33143			7801 LUDLAM RD SO MIAMI FL 33143-4538						
							3. Date Incorporated or Qualified 09/12/1972	3a. Date of Las 05/01/1996	
2. Principal P	lace of Business		2a. Mailing Address				4. FEI Number	1	Applied For
21			26				59-1418484		Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired		5 Additional Required
City & State			City & State				6. Election Campaign Financing		May Be
23			28				Trust Fund Contribution Added to Fees		
Zip		Country	Zip				8. This corporation has liability for intangible tax under s. 199.032,		
24 25			29				Florida Statutes Yes No 10. Name and Address of New Registered Agent		
9, Name and Address of Current Registered Agent						Name	10. Name and Address of New He	gistered Agent	
	NER BRUCE I LUDLAM RD								
	MI FL 33143			82	Street Ad	dress (P.O. Box Number is Not Acceptab	ile)		
Milita	MI I E 00170				83				
								700	
					84	City			ip Code
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, lyped or po	inted name of registered ag				ont signature rec	quired when reinstating)	DATE	2000 111 10
12. TITLE	D	OFFICERS AN	ID DIRECTORS		13. 1,1 HTLE		ADDITIONS/CHANGES TO OFFIC	Chang	
NAME	HARRIS, LAI	RY J			.2 NAME			[7] Autur	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
STREET ADDRESS	7901 LUDLA					ADDRESS			
CITY-SY-ZIP	S MIAMI, FL	00000			1,4 CITY - 1	- 1			
TITLE	V		☐ DEI	LETE 2	2 1 TITLE			Chang	e Addition
NAME	DEUTSCH,E				2 2 NAME				
STREET ADDRESS	7901 LUDLA		2.3 \$1		2.3 STREE	ADDRESS			
CITY-ST-ZIP	S MIAMI, FL	00000			2 4 Cily-	ST-ZIP		Chang	ne Addition
TAYLE	exvp Wilner, Br	HOE S	F.3 DEI	i '	31 TITLE			L) Gliant	li: [Youngui
NAME STREET ADDRESS	7901 LUDLA			I	3 2 NAME	r address			
CITY-ST-ZIP	S. MIAMI FL				3 4. CITY-				
TITLE	V. 11 12		DE		4 1 TITLE	31-211		Chan	ge Addition
NAME					4 2 NAME				
STREET ADDRESS				4	4 3 STREE	T ADDRESS			
CITY-ST-ZIP					4 4 CITY-	ST-ZIP			
TITLE			DEI		5 1 TITLE	1		Chan	ge 🔲 Addition
NAME					5.2 NAME				
STREET ADDRESS						1 ADDRESS			
CITY-ST-ZIP	 		DEI		5.4 CITY- 6 1 TITLE	SI-ZIP		Chan	ge Addition
TITLE			اعرو (سیا		6.2 NAME			المالة لسب	, E noumon
NAME STREET ADDRESS		Ν.				1 ADURESS			
CITY-ST-ZIP		11			6.3 SINCE 6.4 CITY-	1	t .		
14 I do berel	by cortify that th	o information purch	od with this filing does n				ted in Section 119 07(3)(i). Florida Statule	s I further certify t	nat the

with his filling does not quality for the exemption stated in Section 119.07(3)(i), Fortice states. Find the currier centre per permitted annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that he receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name information indicated I am an officer or dire appears in Block 12 d