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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000015202 (2)

S & F RESTAURANT VENTURES, INC.

FILED Mar 19 1998 8:00am Secretary of State



		6 do 1			(100)4000 110 0000 07011 E8 HA 08 HA 08	63161 (1841 A)			
Principal Place		Mailing Address							
715 EAST VINE STREET KISSIMMEE FL 34744 US			1100 METRO PKWY Suite 7 Ft. Myers Fl 33912						
						DO NOT WRITE IN THIS SPACE			
		U\$	US			Date Incorporated or Qualified 02/21/1994			
2. Principal Pla	ace of Business	2a. Mailing Address		,	4. FEI Number		Ap	plied For	
21		26 661 STONFIA	ins ho	oP	65-0483354		No	t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75		
22		27					Fee Re	<u> </u>	
City & State)	City & State	FL		6. Election Campaign Financing		\$5.00		
23	Country	28 Heathrow	Country		Trust Fund Contribution		Added t		
Zιρ	⊢	→ 20md/	30	USA	This corporation owes or has pa Personal Property Tax due June			angibie] No	
24	25 g. Name and Address of Curr		1301		10. Name and Address of New Re			2 110	
SM	ITH, JAMES		81	Name		-			
	000-7 METRO PKWY								
	MYERS FL 33912		82	Street Add	Iress (P.O. Box Number is Not Acceptat	ole)			
, , ,	WILLIO I E GOOTE		83						
				ļ					
			84	City		FL ^{[*}	85 Zip (Code	
11 Pursuant to	to the provisions of Sections 607.0	502 and 607 1508. Florida Statut	es, the above	e-named corr	poration submits this statement for the p	ournose of ch	nanging it	s registered	
111 1 01000.11	onistored amont or both, in the Sta	ite of Florida. Such change was a	authorized by	v the corpora	tion's board of directors. I hereby acce	pt the appoin	itment as	registered	
office or re			arida Ctatula						
office or ro agent. I ar	m familiar with, and accept the obl	ligations of, Section 607.0505, Flo	orida Statute	S .					
office or re agent. Lar SIGNATURE	m familiar with, and accept the obl	igations of, Section 607.0505, FR	orida Statule	5.	iked when reinslating)	DATE			
office or ro agent. I an SIGNATURE	m familiar with, and accept the obli-	igations of, Section 607.0505, Fig.	orida Statule	5.	iked when reinstating) ADDITIONS/CHANGES TO OFFICE		RECTOR	IS IN 12	
office or re agent. Lar SIGNATURE	m familiar with, and accept the obli-	igations of, Section 607.0505, FR	E Registered Ag	5.		CERS AND D	IRECTOR	IS IN 12	
office or reagent. I an SIGNATURE	m familiar with, and accept the ob-	igations of, Section 607.0505, FR aged and life diagraphicable (NOT NOT DIRLCTORS	E Registered Age	5.		CERS AND D			
office or reagent. I an SIGNATURE 12. TITLE NAME	Signature, bysed or persent name of registered. OFFICERS A SV FOREST, EUZABETH M. 13326 MARQUETTE BLVD	igations of, Section 697.0505, FR igations blied right able. (NOT IND DIRECTORS DELETE	E Registered Age 13. 1.1 TITLE	S.		CERS AND D			
office or reagent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, bysed or period name of registered. OFFICERS A SV FOREST, EUZABETH M.	igations of, Section 697.0505, FR igations blied right able. (NOT IND DIRECTORS DELETE	E Registered Age 13. 1.1 TITLE 1.2 NAME	s. I ADORESS		CERS AND D			
office or reagent. I an SIGNATURE 12. TITLE NAME	Signature, bysed or persent name of registered. OFFICERS A SV FOREST, EUZABETH M. 13326 MARQUETTE BLVD	igations of, Section 697.0505, FR igations to the diagram able (NOT NOT DIRI CTORS DELETE	E Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 SYREET	s. I ADORESS		CERS AND D			
office or reagent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, bysied or persent name of requirement. OFFICERS A SV FOREST, EUZABETH M. 13326 MARQUETTE BLVD: FT MYERS FL PD SMITH, JAMES F	igations of, Section 607.0505, FR my of and billed applicable (NOT NOT DIRI CTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 SYREET	s. I ADORESS		CERS AND D	Change	Addition	
office or reagent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, bysied or persent name of requirement. OFFICERS A SV FOREST, EUZABETH M. 13326 MARQUETTE BLVD FT MYERS FL PD	igations of, Section 607.0505, FR my of and billed applicable (NOT NOT DIRI CTORS DELETE	E Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY - 5 2.1 TITLE	s. I ADDRESS ST-ZIP		CERS AND D	Change	Addition	
office or reagent. I ar signature 12. 17. 17. NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, bysied or persent name of requirement. OFFICERS A SV FOREST, EUZABETH M. 13326 MARQUETTE BLVD: FT MYERS FL PD SMITH, JAMES F	igations of, Section 607.0505, FR my of and billed applicable (NOT NOT DIRI CTORS DELETE	E Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5 2.1 TITLE 2.2 NAME	s. I ADDRESS I ADDRESS		CERS AND D	Change	Addition	
office or reagent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	Signature, bysied or persent name of registered. OFFICERS A SV FOREST, EUZABETH M. 13326 MARQUETTE BLVD: FT MYERS FL PD SMITH, JAMES F 11000-7 METRO PKWY	igations of, Section 607.0505, FR my of and billed applicable (NOT NOT DIRI CTORS DELETE	E Registered Ap 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREET	s. I ADDRESS I ADDRESS		CERS AND D	Change	Addition	
office of reagent. I ar signature 12. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, bysied or persent name of registered. OFFICERS A SV FOREST, EUZABETH M. 13326 MARQUETTE BLVD: FT MYERS FL PD SMITH, JAMES F 11000-7 METRO PKWY	igations of, Section 607.0505, Fig. age of and billed applicable (NOT NO DIRI CTORS DELETE	E Registered Ap 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-	s. I ADDRESS I ADDRESS		CERS AND D	Change	Addition Addition	
office of reagent. I ar signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE THE STREET ADDRESS CITY-ST-ZIP TITLE	Signature, bysied or persent name of registered. OFFICERS A SV FOREST, EUZABETH M. 13326 MARQUETTE BLVD: FT MYERS FL PD SMITH, JAMES F 11000-7 METRO PKWY	igations of, Section 607.0505, Fig. age of and billed applicable (NOT NO DIRI CTORS DELETE	E Registered Ap 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE	s. I ADDRESS ST-ZIP I ADDRESS ST-ZIP		CERS AND D	Change	Addition Addition	
office or reagent. I ar agent. I ar agent. I ar signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	Signature, bysied or persent name of registered. OFFICERS A SV FOREST, EUZABETH M. 13326 MARQUETTE BLVD: FT MYERS FL PD SMITH, JAMES F 11000-7 METRO PKWY	igations of, Section 607.0505, Fig. age of and billed applicable (NOT NO DIRI CTORS DELETE	E Registered Ap 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME	s. I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS		CERS AND D	Change Change	Addition Addition	
office or reagent. I ar agent. I ar agent. I ar signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, bysied or persent name of registered. OFFICERS A SV FOREST, EUZABETH M. 13326 MARQUETTE BLVD: FT MYERS FL PD SMITH, JAMES F 11000-7 METRO PKWY	igations of, Section 607.0505, Fig. age of and billed applicable (NOT NO DIRI CTORS DELETE	E Registered Ap 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-3.1 TITLE 3.2 NAME 3.3 STREET 3.1 STREET	s. I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS		CERS AND D	Change	Addition Addition	
office of reagent. I ar agent. I ar agent. I ar signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, bysied or persent name of registered. OFFICERS A SV FOREST, EUZABETH M. 13326 MARQUETTE BLVD: FT MYERS FL PD SMITH, JAMES F 11000-7 METRO PKWY	igations of, Section 607.0505, Fig. igations of Section 607.0505, Fig. igations of Section 607.0505, Fig. (NOT DIRI CTORS DELETE DELETE DELETE	E Registered Ap 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY- 3.4 CITY-	s. I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP		CERS AND D	Change Change	Addition Addition	
office of reagent. I are agent. I are agent. I are signature. 12. Title NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, bysied or persent name of registered. OFFICERS A SV FOREST, EUZABETH M. 13326 MARQUETTE BLVD: FT MYERS FL PD SMITH, JAMES F 11000-7 METRO PKWY	igations of, Section 607.0505, Fig. igations of Section 607.0505, Fig. igations of Section 607.0505, Fig. (NOT DIRI CTORS DELETE DELETE DELETE	E Registered Ap 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY- 4.1 TITLE 4.2 NAME	s. I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP		CERS AND D	Change Change	Addition Addition	
office of reagent. For agent. For	Signature, bysied or persent name of registered. OFFICERS A SV FOREST, EUZABETH M. 13326 MARQUETTE BLVD: FT MYERS FL PD SMITH, JAMES F 11000-7 METRO PKWY	igations of, Section 607.0505, Fig. igations of Section 607.0505, Fig. igations of Section 607.0505, Fig. (NOT DIRI CTORS DELETE DELETE DELETE	E Registered Ap 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY- 4.1 TITLE 4.2 NAME	I ADDRESS		CERS AND D	Change Change Change	Addition Addition Addition	
Office of reagent. For agent. For	Signature, bysied or persent name of registered. OFFICERS A SV FOREST, EUZABETH M. 13326 MARQUETTE BLVD: FT MYERS FL PD SMITH, JAMES F 11000-7 METRO PKWY	igations of, Section 607.0505, Fig. igations of Section 607.0505, Fig. igations of Section 607.0505, Fig. (NOT DIRI CTORS DELETE DELETE DELETE	E Registered Ap 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREET 4.3 STREET 4.4 STREET	I ADDRESS		CERS AND D	Change Change	Addition Addition	
Office of reagent. Let agent. Let	Signature, bysied or persent name of registered. OFFICERS A SV FOREST, EUZABETH M. 13326 MARQUETTE BLVD: FT MYERS FL PD SMITH, JAMES F 11000-7 METRO PKWY	Igations of, Section 607.0505, Fig. Rey of and billed applicable. (NOT NOTO DIRECTORS DELETE DELETE DELETE	E Registered Ap 13. 1.1 Title 1.2 NAME 1.3 STREE1 1.4 CITY-5 2.1 Title 2.2 NAME 2.3 STREE1 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE1 4.1 TITLE 4.2 NAME 4.3 STREE1 4.1 TITLE 4.2 NAME 4.3 STREE1 4.4 CITY-1	I ADDRESS		CERS AND D	Change Change Change	Addition Addition Addition	
Office of reagent. Far agent. Far	Signature, bysied or persent name of registered. OFFICERS A SV FOREST, EUZABETH M. 13326 MARQUETTE BLVD: FT MYERS FL PD SMITH, JAMES F 11000-7 METRO PKWY	Igations of, Section 607.0505, Fig. Rey of and billed applicable. (NOT NOTO DIRECTORS DELETE DELETE DELETE	E Registered Ap 13. 11 TITLE 1.2 NAME 1.3 SYREET 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.1 TITLE 5.2 NAME 5.1 TITLE 5.2 NAME	I ADDRESS		CERS AND D	Change Change Change	Addition Addition Addition	
Office of reagent. I are agent.	Signature, bysied or persent name of registered. OFFICERS A SV FOREST, EUZABETH M. 13326 MARQUETTE BLVD: FT MYERS FL PD SMITH, JAMES F 11000-7 METRO PKWY	Igations of, Section 607.0505, Fig. Rey of and billed applicable. (NOT NOTO DIRECTORS DELETE DELETE DELETE	E Registered Ap 13. 11 TITLE 1.2 NAME 1.3 SYREET 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.1 TITLE 5.2 NAME 5.1 TITLE 5.2 NAME	I ADDRESS ST-ZIP		CERS AND D	Change Change Change Change	Addition Addition Addition Addition	
Office of reagent. I are agent.	Signature, bysied or persent name of registered. OFFICERS A SV FOREST, EUZABETH M. 13326 MARQUETTE BLVD: FT MYERS FL PD SMITH, JAMES F 11000-7 METRO PKWY	Igations of, Section 607.0505, Fig. Rey of and billed applicable. (NOT NOTO DIRECTORS DELETE DELETE DELETE	E Registered Ap 13. 11 TITLE 1.2 NAME 1.3 SYREET 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREET 5.3 STREET	I ADDRESS ST-ZIP		CERS AND D	Change Change Change	Addition Addition Addition	
Office of reagent. I are agent.	Signature, bysied or persent name of registered. OFFICERS A SV FOREST, EUZABETH M. 13326 MARQUETTE BLVD: FT MYERS FL PD SMITH, JAMES F 11000-7 METRO PKWY	Igations of, Section 607.0505, Fig. August a modelic diagnification (NOT ORES DELETE) DELETE DELETE DELETE	E Registered Ap 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY- 5.5 TITLE 5.2 NAME 5.3 STREET 5.4 CITY- 5.5 TITLE 5.5 NAME 5.5 STREET 5.6 CITY- 5.7 TITLE 5.7 NAME 5.7 STREET 5	I ADDRESS ST-ZIP		CERS AND D	Change Change Change Change	Addition Addition Addition Addition	
Office of reagent. For agent. For	Signature, bysied or persent name of registered. OFFICERS A SV FOREST, EUZABETH M. 13326 MARQUETTE BLVD: FT MYERS FL PD SMITH, JAMES F 11000-7 METRO PKWY	Igations of, Section 607.0505, Fig. August a modelic diagnification (NOT ORES DELETE) DELETE DELETE DELETE	E Registered Ap 13. 11 TITLE 1.2 NAME 1.3 SYREET 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREET 5.1 TITLE 5.2 NAME 5.3 STREET 5.1 TITLE 6.2 NAME 5.3 STREET 5.1 TITLE 5.2 NAME 5.3 STREET 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-1 6.1 TITLE 6.2 NAME	I ADDRESS ST-ZIP		CERS AND D	Change Change Change Change	Addition Addition Addition Addition Addition	
Office of reagent. Lar agent. Lar agent. Lar signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP	Signature, lysed or pended name of registered. SV FOREST, EUZABETH M. 13326 MARQUETTE BLVD: FT MYERS FL PD SMITH, JAMES F 11000-7 METRO PKWY FT. MYERS FL	Igations of, Section 607.0505, Fig. 1997.0505, Fig. 1997.0505, Fig. 1997.0505. Inc. of and billed applicable	E Registered Ap 13. 11 TITLE 1.2 NAME 1.3 STREE! 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREE* 2.4 CITY-3.1 TITLE 3.7 NAME 3.3 STREE* 3.4 CITY-4.1 TITLE 4.2 NAME 4.3 STREE* 4.4 CITY-5 1.1 TITLE 5.2 NAME 5.3 STREE* 5.4 CITY-6 6.1 TITLE 6.2 NAME 6.3 STREE 6.4 CITY-6 6.3 STREE 6.4 CITY-6 6.4 CITY-6 6.5 STREE 6.4 CITY-6 6.5 STREE 6.	S. I ADDRESS ST-ZIP I ADDRESS ST-ZIP		CERS AND D	Change Change Change Change	Addition Addition Addition Addition Addition	

OLONIATURE.

James F. Smith

3/13/98 407-333-3278

CR2E034 (10/