## 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 # 281875

(5)

BREVARD RESTAURANTS THREE, INC.

**FILED** 

Mar 16 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address					t teetie tinet felet tiest tekt lebbt e	ter dibit bidie geni: binit mints ginit 1864
380 MERRITT ISL. CSWY P.O. BOX 6544 MERRITT ISLAND FL 32952 TITUSVILLE FL 32782-6544						
			44		DO NOT WRIT	E IN THIS SPACE
					3. Date Incorporated or Qualified	L IN THIS STACE
					06/01/1964	
2. Principal Place of Bu	usiness	2a. Mailing Address			4, FEI Number	Applied For
21	ļ-	26			59-1058825	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$9.75 Additional
22 27					5. Certificate of Status Desired	Fee Required
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
23	<u>;</u>	28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	,	8. This corporation owes or has p	
24	25	29	30		Personal Property Tax due June	
g. Nai	ne and Address of Current Re	egistered Agent			10. Name and Address of New Re	agistered Agent
POE, EDWA	RD M.		81	Name		
P.O. BOX 6544., 32782-6544				Street A	et Address (P.O. Box Number is Not Acceptable)	
11 E. MAX BREWER PWY. TITUSVILLE FL 32796			82		indicate (i.e., Don Harrison to Hot Nobella	5.5,
			83			
			84	City		les Zin Codo
			07	City		FL 85 Zip Code
office or registered	visions of Sections 607.0502 an agent, or both, in the State of F with, and accept the obligation	lorida Such change was	authorized b	the corp	corporation submits this statement for the poration's board of directors. I hereby acce	purpose of changing its registered of the appointment as registered
SIGNATURE						
12.	pod or printed name of registered agent and OFFICERS AND DI		13.	ent signature	required when reinstating)	DATE
TITLE VD	OI TIQENS AND DI	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
	PAULETTE		1.2 NAME			
	IMPERIAL ST.		1.3 STREET	ADDDCCC		
	ITT ISLAND FL					}
TITLE PDS	TODAY TE	DELETE	1.4 CITY - 5 2.1 TITLE	1-211	<del></del>	Change Addition
	edward M.		2.2 NAME	I		C. C
	MAX BREWER PWY., P.O. B	NOV R544	2.3 STREET	ADDOECC		
	VILLE FL 32782	707 <b>0</b> 044	2.4 CITY-			
TITLE DAS	THE TE VETOR	DELETE	3.1 TITLE		DAS	Change Addition
I = :	, Jerry		3.2 NAME	:	DAN FARIEU	7
	IMPERIAL ST.		3.3 STREET	AUDRESS	Dan Fariey No Imperial St	
	TT ISLAND FL		3.4. CITY-	7 7/0	MCRRH+ FSIAND, FI 3	2052
TITLE D	// IOD#IO 1 L	<b>X</b> DELETE	4.1 TITLE	SI-ZIF	ILECT 43/HOU, FI B	Change Addition
	IN, GORDAN		4. 2 NAME	- 1		
	IMPERIAL ST		4.3 STREET	ADDRESS		
LAPON	TT ISLAND FL			i		
TITLE AST	11 144 144 14	DELETE	4.4 CITY - S 5.1 TITLE		AST	Change Addition
	TY, MARYANN	And secret	5.2 NAME	<u> </u>	THECOM L. RUYKOWSK	- Fullingo
	IMPERIAL ST.		5.3 STREET	ADDRESS	TERGOR L. Rutkowsk	
E AFTENDA	TT ISLAND FL			T ZID	Maggidian Trinsies #1 =	2952
CITY-ST-ZIP WIGHTI		DELETE	5.4 CITY-S 6.1 TITLE	; - LIF	Merritt Island, FI 3	Change Addition
NAME		OLLETE	6.2 NAME			Change C Addition
STREET ADORESS				*DODE OF		
J			6.3 STREET			
CITY-ST-ZIP			6.4 CITY-S	1-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(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.