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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUI	MENI # <b>28187</b> 5	; )			1		
1. Corporation	n Name						
DUEANU	D RESTAURANTS THREE,	INC.			1 (88)(\$ 1188) (8)8) (888) (8)(1 \$688) 8)(1 \$1)	ili Ribil disti Sibil di	an 9185 (95)
÷	· m · marketingeringer etchemien		٠ ، سبعید ،				
Principal Place	e of Business	Mailing Address			T I MANTA (1880 I DINT (1880 I NATI I BANT NITE BAT	'ti Bibii BiBit BiBil di	E11 E1E11 1E01
380 MERRITT ISL. CSWY P.O. BOX 6544							
MERRITT ISLAND FL 32952 TITUSVILLE FL 32782-6544			544		DO NOT WOITE IN T	110 CD 1 OF	
					DO NOT WRITE IN T	115 SPACE	
					3. Date Incorporated or Qualifed 06/01/1964		}
2 Principal Pl	lace of Business	2a. Mailing Address	34.5		4. FEI Number	Apr	olied For
21 26		<u></u>	•		59-1058825	<u> </u>	Applicable
		Suite, Apt. #, etc.	Apt. #, etc.			\$8.75 A	dditional
27					5. Certificate of Status Desired	Fee Rec	quired
City & State City & State					6. Election Campaign Financing	\$5.00	May Be
23	28				Trust Fund Contribution	Added to	Fees
Zip	Country Zip		Country				□M-
24	[25]	1 29	30		Personal Property Tax.  10. Name and Address of New Register		□No
<del> </del>	9. Name and Address of Curre	nt Registered Agent	81	Name	10, Name and Address of New Register	eu Agent	<del></del> -
POE, EDWARD M.							
P.O. BOX 6544., 32782-6544			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
11 E. MAX BREWER PWY.			83	<u>-</u> -			
TITUSVILLE FL 32796							
			84	City	F	EL  85   Zip C	.ode
11, Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida St	atutes, the above	e-named cor	poration submits this statement for the purpose	of changing its	registered
office or n	egistered agent, or both, in the State m familiar with, and accept the obliga	aof Florida. Such change wa	as authorized by	the corporat	tion's board of directors. I hereby accept the ap	pointment as reg	jistered
SIGNATURE	rammar man, and accept the cong.		-				
SIGNATORE	Signature, typed or printed name of registered age		IOTE: Registered Agen	t signature requir			70 111 40
12.	<del></del>	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	Addition
TITLE	_		1.1 TITLE 1.2 NAME			Change	
NAME	DAVIS, PAULETTE   140B IMPERIAL ST.			*************			
STREET ADDRESS	MERRITT ISLAND FL		1.3 STREET 1.4 CITY-ST				
CITY-ST-ZIP	PDS DELETE			1-211-		☐ Change	Addition
NAME	POE, EDWARD M.		2.2 NAME				
STREET ADDRESS	44 E MAY PROMED BUSY D.O. BOY SEA4			ADDRESS		-	
CITY-ST-ZIP	TITUSVILLE FL 32782		2, 4 CITY-S	T-ZIP			
TITLE	DAS DELETE					☐ Change	☐ Addition
NAME	FARLEY, DAN	ARLEY, DAN 3.2		-			Ì
STREET ADDRESS	140 IMPERIAL ST		3.3 STREET	ADDRESS			
CITY-\$T-ZIP	MERRITT ISLAND FL 32952		3.4. CITY-S	T-ZIP			
TITLE	SAT	☐ DELETE	4.1 TITLE		AT	Change	☐ Addition
NAME	RUTKOWSKI, TERESA	,	4.2 NAME		ABARON, TEresa		
STREET ADDRESS	140 IMPERIAL ST		4.3 STREET	ADDRESS	40 Imperial St. YCKLIH ISLAND, Fl 329	C2.	İ
CITY-ST-ZIP	MERRITT ISLAND FL 32952	☐ DELETE	4.4 CITY-S	T-ZIP	KKKKHT I YMNU, M 3012	Change	Addition
TITLE	,	C) DETELE	5.1 TITLE 5.2 NAME			☐ Auguste	
NAME	, ,		5.3 STREET	ADDRESS			1
STREET ADDRESS	(1) 11 (1) (1) (1) (1) (1) (1) (1) (1) (		5.4 CITY-S				
CITY-ST-ZIP TITLE	2 60 0 20	DELETE		·  -		Change	Addition
NAME	2017 身体化 第		6.2 NAME				
ATTORIE ADDRESS				ADDRESS			

CITY-ST-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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: