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May 09 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 448674 (2)
1. Corporation Name
FOOD SPOT NO. 31 INCORPORATED



Principal Place of Business Mailing Address
7901 LUDLAM RD 7901 LUDLAM RD
SO MIAMI FL 33143 SO MIAMI FL 33143-4538

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		26		05/13/1974		05/01/1996	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number		Applied For	
23 City & State		28 City & State		59-1534208		Not Applicable	
24 Zip		25 Country		5. Certificate of Status Desired		8.75 Additional Fee Required	
29 Zip		30 Country		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		Yes No	

9. Name and Address of Current Registered Agent

BRUCE WILNER
7901 LUDLAM RD
MIAMI FL 33143

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip 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: typed or printed name of registered agent and title if applicable) (NOT: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	1.1 TITLE	
NAME	DEUTSCH, ELLIOT J	1.2 NAME	
STREET ADDRESS	7901 LUDLAM RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	SO MIAMI, FL 00000	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	
NAME	HARRIS, LARRY J	2.2 NAME	
STREET ADDRESS	7901 LUDLAM RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	SO MIAMI, FL 00000	2.4 CITY-ST-ZIP	
TITLE	EXVP	3.1 TITLE	
NAME	BRUCE WILNER	3.2 NAME	
STREET ADDRESS	7901 LUDLAM ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	SO MIAMI FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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, or on an attachment with an address.

SIGNATURE _____ 4/10/97 (205) 666-0642

CR2E034 (9/96)