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PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTM[illegible] STATE
Sandra B. Mor[illegible]
Secretary of St[illegible]
DIVISION OF CORPO[illegible]TIONS

DOCUMENT # **454757** **(6)**

1. Corporation Name

JACK'S OLD FASHION HAMBURGER HOUSE, INC.

Principal Place of Business	Mailing Address
4201 NORTH FEDERAL HIGHWAY FORT LAUDERDALE FL 33308	4201 NORTH FEDERAL HIGHWAY FORT LAUDERDALE FL 33308

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip / Country	Zip / Country
24 / 25	29 / 30

3. Date Incorporated or Qualified: **06/14/1974**	3a. Date of Last Report: **02/14/1995**
4. FEI Number: **59-1644430**	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
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

BIRR, JAMES O. JR.
5100 N. FEDERAL HWY.
FORT LAUDERDALE FL 33308

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 [illegible] DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1 TITLE	PD	1 TITLE	P
1 NAME	BERRY, JACK M.	1 NAME	BERRY JACK M
1 STREET ADDRESS	130 S. CYPRESS RD #628	1 STREET ADDRESS	4580 NW 17 AVE
1 CITY-ST-ZIP	POMPANO FL	1 CITY-ST-ZIP	TAMARAC FL 33309
2 TITLE	V	2 TITLE	
2 NAME	BORELLO, DENNIS	2 NAME	
2 STREET ADDRESS	22598 SEA BASS DRIVE	2 STREET ADDRESS	
2 CITY-ST-ZIP	BOCA RATON FL	2 CITY-ST-ZIP	
3 TITLE	ST	3 TITLE	
3 NAME	GLUTH, JEFF	3 NAME	
3 STREET ADDRESS	3311 N.W. 47 AVE.	3 STREET ADDRESS	
3 CITY-ST-ZIP	COCONUT CREEK FL	3 CITY-ST-ZIP	
4 TITLE		4 TITLE	
4 NAME		4 NAME	
4 STREET ADDRESS		4 STREET ADDRESS	
4 CITY-ST-ZIP		4 CITY-ST-ZIP	
5 TITLE		5 TITLE	
5 NAME		5 NAME	
5 STREET ADDRESS		5 STREET ADDRESS	
5 CITY-ST-ZIP		5 CITY-ST-ZIP	
6 TITLE		6 TITLE	
6 NAME		6 NAME	
6 STREET ADDRESS		6 STREET ADDRESS	
6 CITY-ST-ZIP		6 CITY-ST-ZIP	

☐ DELETE ☑ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Jack M. Berry 2/3/96 305 491-5179

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE #

CR2E034 (12/95)