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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 454757

JACK'S OLD FASHION HAMBURGER HOUSE, INC.

FILED Jan 28, 1999 8:00am **Secretary of State**

01-28-1999 90035 009 ***150.00

Principal Plac	ce of Business	Mailing Address						
4201 NORTH F	FEDERAL HIGHWAY	4201 NORTH FEDERAL H	HIGHWAY					
FORT LAUDER	IDALE FL 33308	FORT LAUDERDALE FL 3	33308		DO NOT WRITE IN T	THE SDACE	_	
					3. Date Incorporated or Qualifed	nis space]
					06/14/1974	•		Ì
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	· Ar	plied For	.3
21		26			59-1644430	No	ot Applicable	1
Suite, Apt.	. #, etc	Suite, Apt. #, etc	، رسد سسحه د		5. Certificate of Status Desired	= \$8.75		
22		27					equired	
City & Star	te	City & State			6. Election Campaign Financing Trust Fund Contribution		May Be	
Zip	Country	Zip	Country				to Fees	
24	25	29	30		 This corporation owes the current year Personal Property Tax. 	Yes	□No	ľ
.	9. Name and Address of Curre				10. Name and Address of New Registe			
	40,000 2 3 3	(81	Name				
BIR	R, JAMES O. JR. O'N. FEDERAL HWY. (1984)	CH WHICH I'V	82	Street Addr	ress (P.O. Box Number is Not Acceptable)			
	ON, FEDERAL HWY. RT LAUDERDALE FL 33308	िक्यार्थि (प्रशिक्षः) ६			A CARACTER STATE OF THE STATE O	<u> </u>	ъ	
FOR	11 DAUDENDALE LE 33300		83					
		•	84	City	*** *** *** *** *** **** **** **** **** ****		Cöde	
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"" office or i	registered agent, or both, in the Stat	te of Florida. Such change was	authorized by th	-named corp he corporation	poration submits this statement for the purposion's board of directors. I hereby accept the a	e of changing its opointment as re	gistered	
agent La	am familiar with, and accept the oblig	gations of, Section 607.0505, Fi	lorida Statutes.			•		ı
J		_					ſ	ľ
SIGNATURE	Signature, typed or printed name of registered as	gent and title if applicable. (NOT		signature require	od when reinstating) DATE			_
J	Signature, typed or printed name of registered as	gent and title if applicable. (NOT		signature require	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS		DRS IN 12	(86)
SIGNATURE	Signature, typed or printed name of registered at OFFICERS A		TE: Registered Agent s	signature require	ADDITIONS/CHANGES TO OFFICERS		DRS IN 12	(11/98)
SIGNATURE	Signature, typed or printed name of registered at OFFICERS A PD BERRY, JACK M.	AND DIRECTORS	TE: Registered Agent s	signature require		AND DIRECTO		34 (11/98)
SIGNATURE 12. TITLE	Signature, typed or printed name of registered as OFFICERS A PD BERRY, JACK M. 4580 NW 17THA VE	AND DIRECTORS	TE: Registered Agent s 13. 1.1 TITLE	<u> </u>	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO		F034 (11/98)
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS A PD BERRY, JACK M. 4580 NW 17THA VE TAMARAC FL	AND DIRECTORS	TE: Registered Agent s 13. 1.1 TITLE 1.2 NAME 1.3 STREET A 1.4 CITY-ST-	ADDRESS .	ADDITIONS/CHANGES TO OFFICERS	S'AND DIRECTO	Addition	:R2F034 (11/98)
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SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS A PD BERRY, JACK M. 4580 NW 17THA VE TAMARAC FL ST GLUTH, JEFF	AND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET A 1.4 CITY-ST- 2.1 TITLE 2.2 NAME	ADDRESS ZIP	ADDITIONS/CHANGES TO OFFICERS	S'AND DIRECTO	Addition	CR2E034 (11/98)
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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.

SIGNATURE: