

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED

1995

DOCUMENT # 455040

(6)

NASH-CLARK & VICARIO, INC.

**13923 KOT BLVD. SUITE 814
CLEARWATER FL 34620**

**13923 KOT BLVD. SUITE 814
CLEARWATER FL 34620**

2. Date of Filing		2a. Mailing Address		3. Effective Date of Filing		3a. Date of Last Filing	
21. 06/12/1974		26. 9 Trefoil Drive		4. Filing Fee		5. State of Florida	
22. 06/12/1974		27. 06/12/1974		5. 59-1543009		8.75 Additional Fee Required	
23. 06/12/1974		28. Trumbull CT		6. Election of Corporate Structure		5.00 May Be Added to Fees	
24. 06/12/1974		29. 06611		7. U.S.		8. Florida Statutes	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			

**FARNSWORTH, DAVID, C
1900 HAWAII AVE NE
ST PETERSBURG FL 33703**

81. Name	82. Street Address	83. City	84. State	85. Zip Code
			FL	

11. Pursuant to the provisions of Sections 605, 606, and 607, Florida Statutes, the undersigned corporation submits the statement for the purpose of changing its registered office to the address specified in the statement of the undersigned corporation. The undersigned corporation was authorized by its board of directors to execute this statement and to accept the appointment of the undersigned as its registered agent.

SIGNATURE OF THE UNDERSIGNED OFFICER OR DIRECTOR OF THE CORPORATION

12. SIGNATURE OF THE UNDERSIGNED OFFICER OR DIRECTOR OF THE CORPORATION	13. ADDRESS CHANGED TO OFFICE AND EFFECTIVE DATE
DS LEE, WALLACE 134 BRAEBURN DR. NEW CANAAN CT 06840	T Hayes, John M. 2561 Barry Court Yorktown Heights, NY 10598
DT HENNESSY, DENNIS J. CODFISH HILL RD. BETHEL CT 06801	D
VD FARNSWORTH, DAVID C. 1900 HAWAII AVE NE ST PETERSBURG, FL 33703	
CD KUBOVIC, JOHN W. 7 BERRY LN. DARIEN CT 06821	
	S Kimberlin, Jon E. 116 Rivergate Dr. Wilton, CT 06897
	PD Eastman, James A. 88 Drum Hill Rd. Wilton, CT 06897

14. I, the undersigned, hereby certify that the information furnished in this statement is true and correct and that I am duly qualified to execute this statement. I am a resident of the State of Florida and I am a resident of the State of Florida. I am a resident of the State of Florida and I am a resident of the State of Florida.

SIGNATURE *Dennis Hennessy* **Dennis Hennessy** 4/28/95 (203)459-3640

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INCORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
32399-0001

DOCUMENT # 455160

(2)

RUBEN TACO HOUSES, INC.

RECEIVED
TALLAHASSEE, FLORIDA

1. Principal Office Location 2100 DOG TRACK RD PENSACOLA FL 32506		2a. Mailing Address 2100 DOG TRACK RD PENSACOLA FL 32506	
2. Principal Office Location 21		2a. Mailing Address 26	
2b. State App. # 22		2c. State App. # 27	
2d. City & State 23		2e. City & State 28	
2f. City & State 24		2g. City & State 29	
2h. City & State 25		2i. City & State 30	
3. Date of Report 06/21/1974		3a. Date of Report 05/01/1994	
4. FIC Number 59-1545256		4a. Appointed For Not Applicable	
5. Certificate of State (Detected) ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Total Fund Contribution ☐		\$5.00 May Be Added to Fees	
6a. Does corporation have a plan for election campaign financing? ☒ Yes ☐ No		6b. Does corporation have a plan for election campaign financing? ☒ Yes ☐ No	
9. Name and Address of Current Registered Agent GONZALES, DOLORES 2100 DOG TRACK RD. PENSACOLA FL 32506		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Applicable) 83 84 City FL 85 Zip Code	
11. Consent to the provisions of Sections 602.01 and 602.15, Florida Statutes, the above named corporation submits the 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 provisions of Sections 602.01 and 602.15, Florida Statutes.			
SIGNATURE Signature of Registered Agent: _____ Signature of Registered Agent: _____ Signature of Registered Agent: _____			
12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME STREET ADDRESS CITY STATE ZIP	PD GONZALES, RUBEN 2100 DOGTRACK ROAD PENSACOLA, FL 00000	NAME STREET ADDRESS CITY STATE ZIP	☐ Change ☐ Addition
NAME STREET ADDRESS CITY STATE ZIP	DVS GONZALES, DOLORES 2100 DOG TRACK RD 32506	NAME STREET ADDRESS CITY STATE ZIP	☐ Change ☐ Addition
NAME STREET ADDRESS CITY STATE ZIP		NAME STREET ADDRESS CITY STATE ZIP	☐ Change ☐ Addition
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NAME STREET ADDRESS CITY STATE ZIP		NAME STREET ADDRESS CITY STATE ZIP	☐ Change ☐ Addition
NAME STREET ADDRESS CITY STATE ZIP		NAME STREET ADDRESS CITY STATE ZIP	☐ Change ☐ Addition

14. I, the undersigned, certify that the information required on this filing is accurately furnished and does not qualify for the exemption afforded by Sections 602.01 and 602.15, Florida Statutes. I further certify that the information is filed on the filing of report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if it were made on the filing of report or supplemental annual report or the return of the corporation. I am authorized to make the report as required by Chapter 602, Florida Statutes, and that my name appears in Block 12 or Block 13 or both as an officer or director of the corporation.

SIGNATURE: Ruben Gonzales *Ruben Gonzales*
 SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR