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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 503382

(4)

ALTAMONTE RESTAURANTS, INC.

FILED										
Mar	19	1997	8:00am							
Se	cret	tary of	f State							

Principal Place of Business Mailing Address									1 100 101 01111 00100 11100 11101 11101		• • • • • • • • • •		
18801 VENTURA BLVD #200				18801 VENTURA BLVD #200									
TARZANA CA 9	31358			RZANA CA 91356-334	3								
บร			US	•				-	3. Date Incorporated or Qualifie	38.0	ate of La	st Report	٦
									05/18/1976		01/199	•)
2. Principal Pi	Inna of Dugin	2000	20	Mailing Address					4. FEI Number		01/100	Applied For	
	ace or busin	iess	F=1	Mailing Actoress							\vdash	Not Applicat	
21	JI -4-		26	Suite, Apt. #, etc.					94-2395735		607	5 Additional	
Suite, Apt.	#, etc.			Stille, Apr. #, etc.					5. Certificate of Status Desired			Bequired	
22			27	City & State								·	
City & State	е		=3	City & State				1	6. Election Campaign Financing			00 May Bo led to Fees	{
23			28			mter			Trust Fund Contribution				
Zip		Country	- Firm	Zip Cour		Unuy	лиу		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
24	<u> </u>	25	29		30				Florida Statutes L Yes No 10. Name and Address of New Registered Agent				
4		and Address of Cur	rent Hegis	tered Agent		81	Nan		10. Name and Address of New	registered	Agont		
		TION SYSTEM				0'	INa	ю					
		ration system				82	Stre	et Address	s (P.O. Box Number is Not Accep	table)			
1200) SOUTH F	PINE ISLAND RD.					ļ						
PLAI	NTATION F	L 33324				83							
İ						84	City				85	Zip Code	
										FL	_ `	•	
11. Pursuant office or re	to the provis	sions of Sections 607.1 gent, or both, in the St ith, and accept the ot	0502 and 6 ate of Hori	07.1508, Florida Stat da. Such change wa L. Costino 607.0005	utes, the a s authoriz	abovi ed by	e-nam y the c	ed corporation	ation submits this statement for th i's board of directors. I hereby ac	e purpose o cept the ap	of changir pointmen	ng its registere t as registered	q q
_	m a milar w	itii, and accept the or	nigations o	1, 5600011 007.0505,	riorida Si	atute:	5 .						{
SIGNATURE	Signature, types	Sor purited hame of registeres	ament and life	Pannicable (N	OTE Register	ed Age	ent signa	fure regarded i	when relies along)	DATE			
12,	Digitala D. 19144	OFFICERS			13				ADDITIONS/CHANGES TO OF	FICERS AN	D DIREC	TORS IN 12	
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NAME	1				6.2	namf							
STREET ADDRESS					6.3	\$1RLE	i addre	ss					

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 eath, that I am an officer or director of the corporation or the requiver 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.