

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED

98 DEC -4 AM 8:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 503382

1. Corporation Name

Altamonte Restaurants, Inc.

Amended

Principal Place of Business

Mailing Address

8535 Baymeadows Rd. # 40
Jacksonville, Fl. 32256

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

5/18/76

4. FEI Number

94-2395735

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt #, etc.

22

City & State

23

Zip

Country

24

9. Name and Address of Current Registered Agent

CT Corporation System
1200 S. Pine Island Rd.
Plantation, Florida 33324

2a. Mailing Address

26 8535 Baymeadows Rd. #40

Suite, Apt #, etc.

27 Jacksonville, Fl.

City & State

28

Zip

29 32256

Country

30 Duval

10. Name and Address of New Registered Agent

81 Name

Victor Jackson

82 Street Address (P.O. Box Number is Not Acceptable)

8535 Baymeadows Rd. # 40

83

Jacksonville, Fl. 32256

84 City

FL

85 Zip Code

19. 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 Victor Jackson, President

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

12-2-98

DATE

12. OFFICERS AND DIRECTORS

TITLE P/D

NAME

STREET ADDRESS

CITY-ST-ZIP

Victor Jackson

8535 Baymeadows Rd. # 40

Jacksonville, Florida 32256

☐ DELETE

TITLE S/T/D

NAME

STREET ADDRESS

CITY-ST-ZIP

Dale Fish

8535 Baymeadows Rd. # 40

Jacksonville, Florida 32256

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

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STREET ADDRESS

CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

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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)(f), 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: Victor Jackson, President 12-2-98

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

904/730-9322

Daytime Phone #

CR2E034 (10/97)