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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 **DOCUMENT # 553511** RESTAURANT SITES, INC. . Principal Place of Business Mailing Address 3000 NE 30TH PL., STE, 410 3000 NE 30TH PL., STE. 410 FT. LAUDERDALE FL 33306-1806 FT. LAUDERDALE FL 33306-1905 3. Date Incorporated or Qualified 3a. Date of Last Report 09/20/1977 06/28/1996 2. Principa' Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1780325 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Žφ Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes I No 30 Florida Statutes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 **BELL, STANLEY** 3000 NE 30TH PL, #410 Street Address (P.O. Box Number is Not Acceptable) 82 FT. LAUDERDALE FL 33306 83 City 65 Zin 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. ΡĎ DELETE Change Addition 1.1 TITLE TITLE WERNER, NATHAN 1.2 NAME 2E034 NAME 2037 SE 17TH CT. 1.3 STREET ADDRESS STREET ADDRESS POMPANO BCH. FL 1.4 CITY - ST - ZIP CITY-S1-ZIF Change Addition DELETE TITLE 21 TIDE **BELL, STANLEY** NAME 2.2 NAME 804 CYPRESS GROVE LN. 2.3 STREET ADDRESS STREET ADDRESS POMPANO BCH. FL 2 4 CITY-SY-ZIP CITY - \$1 - 209 DELETE Change Addition 31 TITLE THUE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADORESS 3.4. CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition THUE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST-ZIP 4.4 CITY-S1-ZIP Addition DELETE Change 5.1 TITLE THUE 5.2 NAME NAM: 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZP Change Addition DELETE TOTALE 6.1 TITLE 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS

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 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 chaptered, or on an attachment with an address.

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

64 CITY-ST-ZIP

SIGNATURE:

CITY - ST - ZIP

FILED

May 08 1997 8:00am

Secretary of State

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