

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

FILED  
Apr 25 1996 8:00 am  
Secretary of State

DOCUMENT # 558972 (6)

1. Corporation Name

C & H GRILLE OF HOLLYWOOD, INC.

Principal Place of Business

4800 SW 64TH AVE.  
SUITE 106  
DAVE FL 33314  
US

Mailing Address

4800 SW 64TH AVE.  
SUITE 106  
DAVE FL 33314  
US

3. Date Incorporated or Qualified  
01/25/1978

3a. Date of Last Report  
04/25/1995

2. Principal Place of Business

21 11306 N.W. 15<sup>th</sup> CL.

2a. Mailing Address

26 P.O. Box 292157

4. FEI Number

59-1810485

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes ☐ No

City & State

23 Pembroke Pines, FL

City & State

28 DAVIE, FL

Zip

Country

Zip

Country

24 33026

25 U.S.

29 33329-2157

30 U.S.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KIROUAC, EDMOND

4800 S.W. 64TH AVE., SUITE 106

SUITE 106

DAVE FL 33314

81 Name

SAME

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

11306 N.W. 15<sup>th</sup> CL.

83

84

City Pembroke Pines, FL

FL

85 Zip Code

33026

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

Signature, typed or printed name, of registered agent, if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE STD  
NAME WELLER, MARINA  
STREET ADDRESS 9384 N.W. 8TH CIRCLE  
CITY-ST-ZIP PLANTATION FL ☐ DELETE

TITLE PD  
NAME KIROUAC, EDMUND F  
STREET ADDRESS 10461 NW 18TH DR.  
CITY-ST-ZIP PLANTATION FL ☐ DELETE

TITLE VPD  
NAME KIROUAC, VIRGINIA  
STREET ADDRESS 10461 N.W. 18TH DR.  
CITY-ST-ZIP PLANTATION FL ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARINA  
WELLER

4/19/96

954-431-5789

CR2E034 (12/95)