FILED

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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # 835214

1. Corporation Name

FOODMAKER INC.

Principal Place of Business		Mailing Address					*** •*** •*** •		
9330 BALBOA A		ATTN: TAX DEPT							
SAN DIEGO CA 92123-1516		9330 BALBOA AVE SAN DIEGO CA 32123-1516 US				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			
						10/15/1975			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
<u>'</u>		26				95-2698708		_ No	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75	
		27				U. Optimicate of Clarke Beening		Fee Re	equired
City & State		City & State				6. Election Campaign Financing		•	May Be
23		28				Trust Fund Contribution		Added	to Fees
Zip	Country			ountry		8. This corporation owes the curre			Mo
24	25 29 30)	_		Personal Property Tax. 10. Name and Address of New R		Yes	DAINO
	9. Name and Address of Current	Registered Agent	8	1 Nan	00	10. Name and Address of New N	egistered A	gent	
CT CORPORATION SYSTEM				111011					:
	S. PINE ISLAND ROAD		82			ss (P.O. Box Number is Not Accepta	ıble)		ŀ
PLANTATION FL 33324				3		_			
1 674	TATION I E GOOZY		"	٦					
			8	4 City			FL	85 Zip	Code
44	to the provisions of Sections 607.0502	1 007 1500 Fireide Statuton	the ebe		ad carpa	ration submite this statement for the		hanging its	registered
office or re	egistered agent, or both, in the State o	if Florida. Such change was auth	iorized b	y the co	rporation	n's board of directors. I hereby accep	the appoin	tment as re	gistered
agent. I a	n familiar with, and accept the obligati	ons of, Section 607.0505, Florida	a Statute	95.					
SIGNATURE	Signature, typed or printed name of registered agent	NOTE: De	mintared An	ont exposts	rea required a	when reinstating)	DATE	_	<u>.</u>
12.	OFFICERS AND		13.	Jent Bignat	and required	ADDITIONS/CHANGES TO OF	FICERS AN	DIRECTO	ORS IN 12
TITLE	VD DELETE		1,1 TITLE					Change	☐ Addition
NAME	DUDDLES, CHARLES W		1.2 NAME						Ì
STREET ADDRESS	9330 BALBOA AVE		1.3 STRE	ET ADDRE	:ss				
CITY-ST-ZIP	SAN DIEGO CA 92123		1.4 CITY-	.4 CITY-ST-ZIP					
TITLE	CD	DELETE 2.1 TI						Change	☐ Addition
NAME	GOODALL, JACK W	2.2 N		2.2 NAME					
STREET ADDRESS	9330 BALBOA AVE		. 2.3 STRE	2.3 STREET ADDRESS				-	
CITY-ST-ZIP	SAN DIEGO CA	l	2. 4 CITY	. 4 CITY-ST-ZIP					
TITLE	VS	☐ DELETE	DELETE 3.1 TITLE					☐ Change	☐ Addition
NAME	SCHAUF, LAWRENCE E		3.2 NAME	3.2 NAME					
STREET ADDRESS	9330 BALBOA AVE		3.3 STRE	ET ADDRE	ss				
CITY-ST-ZIP	SAN DIEGO CA		3.4 CITY	-ST-ZIP					
TITLE	PD DELETE		4.1 TITLE					Change	☐ Addition
NAME	NUGENT, ROBERT J		4. 2 NAM	E					
STREET ADDRESS	9999 BALBOA AVE		4.3 STREET ADDRESS		SS				
CITY-ST-ZIP	SAN DIEGO CA 92123		4.4 CITY-	4.4 CITY-ST-ZIP					
TITLE			5.1 TITLE	•				Change	☐ Addition
NAME	WILLIAMS, KENNETH R			5.2 NAME					
STREET ADDRESS 9330 BALBOA AVE.			5.3 STREET ADDRESS		SS				
CITY-ST-ZIP	SAN DIEGO CA 92123			5.4 CITY-ST-ZIP		<u> </u>			
TITLE			6.1 TITLE	5.1 TITLE				Change	☐ Addition
NAME	BOWERS, BRUCE N		6.2 NAM	E					{
STREET ADDRESS			6.3 STRE	ET ADDRE	SS				
CITY-ST-ZIP	SAN DIEGO CA 92123		6.4 CITY	-ST-ZIP					
					4-4:- 0-	- tine 440 07/2)/i) Florido Statutos	I further seri	in that the	information

I 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 changed on an apactment with any address, with all other like empowered.

SIGNATURE

awrence E. Schauf, Exec. V.P., Sec.