

**2004 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2004**

FILED

04 MAY 18 AM 10:34

CLERK OF STATE  
TALLAHASSEE FLORIDA


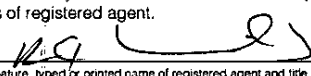
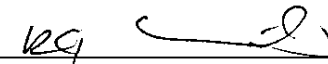
MJH, 1



03192004 Chg-LP CR2E003 (10/03)

4. FEI Number **03-0423868** Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

<b>DOCUMENT # A02000000540</b>					
1. Entity Name <b>VISTAR RESTAURANTS - I DRIVE LIMITED</b>					
Principal Place of Business <b>5728 MAJOR BLVD. SUITE 601 ORLANDO, FL 32819</b>			Mailing Address <b>5728 MAJOR BLVD. SUITE 601 ORLANDO, FL 32819</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>KHATIB, RASHID A 5728 MAJOR BLVD. SUITE 601 ORLANDO, FL 32819</b>			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  DATE					
9. Capital Contributions as Shown on record: <b>\$1,700,000.00</b> <b>\$1,800,000.00</b>					
10. Amount of Capital Contributions in FLORIDA to date: <b>\$526,250</b>					
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT #	P02000035306		STREET ADDRESS		
NAME	VISTAR RESTAURANTS-I DRIVE INC.		CITY-ST-ZIP		
STREET ADDRESS	5728 MAJOR BLVD. SUITE 601				
CITY-ST-ZIP	ORLANDO, FL 32819				
DOCUMENT #			STREET ADDRESS	100036558171	
NAME			CITY-ST-ZIP	05/18/04--01065--004 **1226.25	
STREET ADDRESS					
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STREET ADDRESS					
CITY-ST-ZIP					
14. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes					
SIGNATURE:  3/23/04					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER					

STAPLE CHECK HERE