

FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

313.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 DEC 31 PM 4:09

LIMITED PARTNERSHIP
ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Division of Corporations

A9600000402

1. Name of Limited Partnership
505 North Congress, Ltd.

1a. DOCUMENT #
A96000000402

Mailing Address
**c/o Longhorn Steaks, Inc.
8215 Roswell Road
Building 200
Atlanta, Georgia 30350**

Principal Office Address
**505 North Congress Ave.
Boynton Beach, Florida 33426**

2. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

2a. Principal Office Address
Suite, Apt. #, etc.
City & State
Zip Country

3. Date Formed or Registered
2/29/96

3a. Date of Last Report
N/A

4. State or Country of Formation
Florida

5a. Capital Contributions as Shown on record
\$25,000

5b. Amount of Capital Contributions in FLORIDA to date:
\$25,000

6. FEI Number
58-2229785

7. Certificate of Status Desired
☐ Applied For
☒ Not Applicable

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent
**John J. Underwood
2911 N.W. Banyan Blvd. Circle
Boca Raton, Florida 33431**

10. If changed, new Registered Agent/Office
Name
200002064232--6
Street Address (P.O. Box Number is Not Acceptable)
01/22/97--01061--009
Suite, Apt. #, etc.
*****2823.75 ****313.75**
City
FL Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, 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 its general partner(s). I hereby accept the appointment of registered agent I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) _____ DATE _____

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
Gold Coast Restaurant Group	c/o Longhorn Steaks, Inc. 8215 Roswell Road Building 200 A/R 175.00 SUPP 138.75 <u>313.75</u>	Atlanta, GA 30350	G96060900046

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. 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 release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate, and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee, and am authorized to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE Anne D. Huemme DATE 12/30/96
Anne D. Huemme, Chief Financial Officer of Longhorn Steaks, Inc.,
Typed or Printed Name of General Partner Signing Form a General Partner of Gold Coast Daytime Telephone Number (770) 399-9595
Restaurant Group

CR2E003 (6/96)