

A96000001710

Corrabbas Italian Grill

Requestor's Name

405 North Rex St. Ste 210

Address

Tampa FL 33609

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known)

100002343751--9  
-12/22/97--01040--014  
\*\*\*\*100.00 \*\*\*\*100.00

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) 100002343751--9  
-11/10/97--01181--003  
\*\*\*\*\*75.00 \*\*\*\*\*75.00

3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

☐ Walk in

☐ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
97 DEC 17 AM 10:19

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

increasing  
contributions  
to \$100,000.00  
(corapconch)

C. TAX \_\_\_\_\_  
FILING FEE 100.00  
R. NOTARY FEE \_\_\_\_\_  
C. COPY \_\_\_\_\_  
TOTAL \_\_\_\_\_  
N. BANK \_\_\_\_\_  
BALANCE DUE \_\_\_\_\_  
REFUND \_\_\_\_\_

Examiner's Initials

dec

A96000001710



December 11, 1997

Ms. Diane Cushing  
Corporate Specialist  
Divisions of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Ms. Cushing:

Enclosed please find the 1998 Limited Partnership Annual Report for the following Partnerships:

CARRABBA'S/NORTH CAROLINA-I, LIMITED PARTNERSHIP

REF NO. A97000000128

Two checks totaling: \$453.75

CARRABBA'S/DC-I, LIMITED PARTNERSHIP

REF NO. A96000001431

Two checks totaling: \$803.75

Copy of supplemental Affidavit of Capital Contributions (sent under separate cover)

CARRABBA'S/ARIZONA-I, LIMITED PARTNERSHIP

REF NO. A960000001483

Two checks totaling: \$1,013.75

Copy of supplemental Affidavit of Capital Contributions (sent under separate cover)

CARRABBA'S/FIRST COAST, LIMITED PARTNERSHIP

REF NO. A96000001710

Two checks totaling: \$641.25

Copy of supplemental Affidavit of Capital Contributions (sent under separate cover)

Please call me if you have any questions.

Thank you.

Sincerely,

A handwritten signature in dark ink, appearing to read "Julie Skukalek", is written over a circular stamp.

Julie Skukalek  
Administrative Assistant

H:\USERS\JULIES\FORMS\DOCS\ANNUAL\ADDCKS.LET



**FLORIDA DEPARTMENT OF STATE**  
Sandra B. Mortham  
Secretary of State

November 13, 1997

CARRABBA'S ITALIAN GRILL  
405 NORTH REO ST., STE 210  
TAMPA, FL 33609

SUBJECT: CARRABBA'S/FIRST COAST, LIMITED PARTNERSHIP  
Ref. Number: A96000001710

We have received your document for CARRABBA'S/FIRST COAST, LIMITED PARTNERSHIP and your check(s) totaling \$75.00. However, the document has not been filed and is being retained in this office for the following:

You have increased your contributions by \$25,000.00. Therefore, your fee to file this supplemental affidavit is \$175.00. We will need an additional \$100.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6913.

Diane Cushing  
Corporate Specialist

Letter Number: 497A00054558

**SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS**  
**FOR A FLORIDA LIMITED PARTNERSHIP**

The undersigned, constituting all of the general partners of Carrabba's/First Coast, Limited Partnership, a Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112, Florida Statutes.

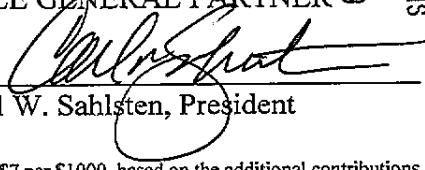
The total amount of the capital contributions of the limited partners is \$100,000.00.

This 21 day of October, 1997.

**FURTHER AFFIANT SAYETH NOT.**

Under penalties of perjury we declare that we have read the foregoing and that the facts are true, to the best of our knowledge and belief.

SOLE GENERAL PARTNER

  
\_\_\_\_\_  
Carl W. Sahlsten, President

Fees: \$7 per \$1000, based on the additional contributions  
Minimum \$52.50 - Maximum \$1750.00

FILED  
97 DEC 17 2M 10:19  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS