

FILE ON OR BEFORE APRIL 7, 1999 TO AVOID  
REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

99 APR -6 PM 1:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



1. Name of Limited Partnership

1a. DOCUMENT #  
A98000001145

CHOICE RESTAURANT ACQUISITION LTD.

Mailing Address

% BROAD AND CASSEL MIAMI CENTER  
201 SOUTH BISCAYNE BLVD., SUITE 3000  
MIAMI FL 33131

Principal Office Address

% BROAD AND CASSEL MIAMI CENTER  
201 SOUTH BISCAYNE BLVD., SUITE 3000  
MIAMI FL 33131

2. Mailing Address

8011 S. Dixie Highway  
Suite, Apt. #, etc.

2a. Principal Office Address

8011 S. Dixie Highway  
Suite, Apt. #, etc.

City & State

West Palm Beach, FL

Zip Country  
33405 USA

City & State

West Palm Beach

Zip Country  
33405 USA

3. Date Formed or Registered

05/08/1998

3a. Date of Last Report

5a. Capital Contributions as  
Shown on record

\$3,000,000.00

5b. Amount of Capital  
Contributions in FLORIDA  
to date

4. State or Country of Formation

FL

6. FEI Number

☒ Applied For  
☐ Not Applicable

7. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

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

9. Name and Address of Current Registered Agent

MAGUIRE, JOHN  
8011 S. DIXIE HIGHWAY  
WEST PALM BEACH FL 33405

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number Is Not Acceptable)

Suite, Apt. #, etc.

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)

CHOICE RESTAURANT MANAGEMENT

11a. Address of Each General Partner  
(Do NOT Use Post Office Box Numbers)

~~201 S. BISCAYNE BLVD.~~  
8011 S. Dixie Highway

11b. City, State & Zip Code

MIAMI FL 33131  
West Palm Beach, FL  
33405

11c. Registration/  
Document Number

P98000041519

000002888270-3  
-04/13/99 -01066-005  
\*\*\*526.25 \*\*\*526.25

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 empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

Typed or Printed Name of General Partner Signing Form

John Maguire CFO

Daytime Telephone Number

(561) 586-4002

CR2E003 (12/98)