FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Jun 08, 1999 8:00 am **Secretary of State**

06-08-1999 90014 022 ***150.00

DOCUMENT #	F416	7 1

1. Corporation Name

FAST Foods of Indian HARbour Bch., Inc.

Principal Place of Busine	ess	Mailing Address	·	. /	ł.			
200 E. EAU	GAllie Blud.	2005N	IRO	pical TR.				
	ebour Beh.,	2005 N. TRopical TR Merritt Island, Fl. 32953		DO NOT WRITE IN THIS SPACE				
LEGIAN TIAN		/ (CKKI)	٠٦_	2 95-3	3. Date Incorporated or Qualifed	G I		
	F/. 32937	,				81	7 7 400	olia d Car
2. Principal Place of Bus	siness	2a. Mailing Address			4. FEI Number 7/2 95	63		olied For t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5 1-2/2 15	•	88.75 A	
		27			5. Certifcate of Status Desired		Fee Rec	-
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be
23		28			Trust Fund Contribution		Added to	· · ·
Zip	Country	Zíp	Country	,	8. This corporation owes the curre	ent year Intangi	ible	
24	25	29 30			Personal Property Tax.		Yes	No No
9. Nam	ne and Address of Current	Registered Agent			10. Name and Address of New R	egistered Age	nt	
	-	TO	81	Name				
/ <i>/-</i>	reorge -	ン <u>ゲ</u> ,	82	Street Addres	ss (P.O. Box Number is Not Acceptal	ble)		
2005 1). TRODICA	JR. -/ TR. Fl. 32953		ļ. —				
2003		T/ 22972	83					
MERRITT	s/ANd,	J-1. SX 133	84	City		8	35 Zip C	ode
						FL_		
office or registered a	agent, or both, in the State of	and 607.1508, Florida Statutes, Florida. Such change was auth ons of, Section 607.0505, Florida	orized by	the corporation	ration submits this statement for the page 3 board of directors. I hereby accept	t the appointme	nging its i ant as rec	registered jistered
SIGNATURE	ed or printed name of registered agent a			nt signature required v	when reinstating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF	ICERS AND D	IRECTO	RS IN 12
TITLE Eq.	wklin C	☐ DELETE	1.1 TITLE				Change	Addition
NAME -		eokge JR.	1.2 NAME	!				
STREET ADDRESS 20	05 N. TRO	PICA/ IR.	1.3 STREE	TADDRESS				
CITY-ST-ZIP Me	eritt_Is/Auc	1 /1. 32753	14 CITY-S	T-ZIP				
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STREET ADDRESS			3.3 STREE	TADDRESS				j
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NAME		1	6.2 NAME					}
STREET ADDRESS			6.3 STREE	TADDRESS				
CITY OT 7ID			6.4 CITY-S	T-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 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, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FRANKlin C. George JR.