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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # F47851

(3)

EDISON MALL RESTAURANT CORP. #2

FILED
Feb 24 1998 8:00am
Secretary of State



Principal Place	o of Business	Mailing Addr	Mailing Address				
C/O MERRILL I. LAMB		-	-				
4770 BISCAYNE BLVD SUITE 1400		4770 BISCAY	C/O MERRILL I. LAMB 4770 BISCAYNE BLVD. SUITE 1400				
MIAMI FL 33137		MIAMI FL 33	MIAMI FL 33137			DO NOT WRITE IN THIS SPACE	
US		US				 Date Incorporated or Qualified 10/08/1981 	
2. Principal Place of Business		2a, Mailing A	2a. Mailing Address			4. FEI Number Applied For	
21		26	the state of the s			59-2128221 Not Applicat	ole
Suite, Apt. #, etc.		27				5. Certificate of Status Desired S8.75 Additional Fee Required	
City & State		City & Sta	City & State			6. Election Campaign Financing \$5.00 May Be	
23	28		Trust Fund Contribution Added to Fees				
Zip	Country	Zip	ļ,	Country		8. This corporation owes or has paid the current year Intangible	
24	[25]	29	30			Fersonal Property Tax due June 30. Yes No	
	g, Name and Address of Curr	ent Registered Age	nt ·			10. Name and Address of New Registered Agent	_
LAN	AB, MERRILL I			81	Name		- 1
4770 BISCAYNE BLVD.				82	Street Add	iress (P.O. Box Number is Not Acceptable)	
Sui	TE 1400						╝
MIA	MI FL 33137			63			
				84	City	FL 85 Zip Code	\dashv
11. Pursuant t	o the provisions of Sections 607.05	502 and 607 1508. F	orida Statutes 1	he above	a-named con		-
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.							
SIGNATURE Signature typed or proted name of expediced agent and title if applicable INOTE Registered Agent signature required when reinstating) DATE							
12.		ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	٦!
TITLE	D		DELETE	1.1 TrTLE		Change Addition	on ;
NAME	COZZOLI, MICHAEL P			1.2 NAME			
STREET ADDRESS	HOFFSTOT LANE SANDS P	T		1.3 STREET	ADDRESS		
CITY-ST-ZIP	PT WASHINGTON, NY 0000	0		1.4 CITY-S	T-ZIP		
TITLE	PD		DELETE	2 1 TITLE		Change Addition	on (
NAME	LAMB, MERRILL I		i	2 2 NAME			
STREET ADDRESS	4770 BISCAYNE BLVD., SUI	TE 1400		2.3 STREET	ADORESS		- }
CITY-ST-ZIP	MIAMI FL			2 4 CITY-S	- 1		ì
TITLE				3 1 TITLE		Change Additi	on
NAME				3 2 NAME		-	-
STREET ADDRESS				3 3 STREET	ADDRESS		
CITY-ST-ZIP				3 4. CITY-S			
FITLE	.,			4.1 TITLE		☐ Change ☐ Addition	on I
NAME			•	4. 2 NAME		·	
STREET ADDRESS				4.3 STREET	ADDRESS		
CITY-ST-ZIP				4.4 CITY - ST			
TITLE				5.1 TITLE		Change Addition	ᇑ
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET	ADDRESS		
CITY-ST-ZIP				5.4 CITY - \$1			
TITLE				6.1 TITLE	- 411	☐ Change ☐ Additio	긁
NAME		_		6.2 NAME			"
STREET ADDRESS				6.3 STREET	ANNRESS		
			Y I		1		
CITY-S1-ZIP				6.4 CITY-ST	- ZIP ·		_

4. Thereby 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 suppliemental 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

SIGNATURE

Francis Man

2/1, lac (65) 576-1912

CR2E034 (10/97