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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F84904

(4)

BARTOLETTA RESTAURANT CORP.

 Mailing Address

FILED May 07 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						
119 NORTH FEDERAL HWY. 119 NORTH FEDERAL HWY.						
DEERFIELD FL		DEERFIELD FL 33441	44 1.			DO MOT WIDITE IN THIS CRACE
						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
						06/11/1982
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For	
21		26				59-2201292 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				\$8.75 Additional
22		27			Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
23	Country	28	Cou	ntru		
Zip 24	25	29	30	i ito y		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24]	g. Name and Address of Currer		1301			10. Name and Address of New Registered Agent
KAI	CZMAREK, JOHN C., P.A.			81	Name	
	NORTH FEDERAL HWY, STE 3	110		62	Street Addre	ess (P.O. Box Number is Not Acceptable)
	CA RATON FL 33432	· · · ·				
				83		
				84	City	85 Zip Code
					_	FL
	egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida Such change was ations of, Section 607.0505, F	authorize lorida Stat	d by utes	the corporation	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered ag-	ons and title if applicable (NO	ITE Registere	d Age	ni signature required	d when reinstating) DATE
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 T I		İ	Change Addition
NAME	BARTOLETTA, SAMUEL L		1.2 N			
STREET ADDRESS	680 LAKE DASHA LANE				ADDRESS	
CITY-ST-ZIP	PLANTATION FL	DELETE	1.4 CI 2.1 TI		r-zip	Change Addition
TITLE			2.1 II			
NAME	BARTOLETTA, EVELYN F 660 LAKE DASHA LANE				ADDRESS	
STREET ADDRESS	PLANTATION FL		2.4 CITY			
CITY-ST-ZIP TITLE	PLANTAHONTE	DELETE	31 TI		7767	☐ Change ☐ Addition
NAME		_	32 N			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			3.4. C	<u> 11Y-</u> 5	ST-ZIP	
TITLE		☐ DELETE	4.1 TI	TLE		☐ Change ☐ Addition
NAME			4.2 N	AME		
STREET ADDRESS			438	FREET	ADDRESS	
CITY-ST-ZIP					IT-ZIP	
TITLE		☐ DELETE	5.1 Ti		ļ	Change Addition
NAME			5.2 N			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP		The see			ST-ZIP	Change Addition
TITLE		☐ DELETE	6.1 Ti			Li Unange Li Addition
NAME			6.2 N			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP	eif. that the information of the con-	with this files does not suclifi.			ST-ZiP	Section 119.07(3)(i). Florida Statutes. I further certify that the information

I hereby certify that in information supplied with this limit does not qualify for the exemption stated in Section 119.0 (2)/f), Florida Statutes. I have a control 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.

SIGNATURE: