## 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

## DOCUMENT # F93000004151

BOSTON CHICKEN, INC.

Principal Place of Business

14103 DENVER WEST PKWY GOLDEN CO 80401

Mailing Address

14103 DENVER WEST PKWY GOLDEN CO 80401

US

## **FILED** May 06, 1999 8:00 am Secretary of State

05-06-1999 90049 001 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

09/13/1993

≡::

					<del></del>
	ace of Business 2a. Mailing Address		<u> </u>	4. FEI Number	Applied For
21 14123	B Denver W Pkwy 26 14123 Deni	ve_l	$\sim$ PKWY	<b>36-3904053</b>	Not Applicable
Suite, Apt.	#, etc. J Suite, Apt. #, etc.		/	5. Certificate of Status Desired	\$8.75 Additional
22	27			3. Certificate of Status Desired	Fee Required
City & State	City & State	0 >		6. Election Campaign Financing	\$5.00 May Be
23 GO1	den CO 28 Golden	-C0		Trust Fund Contribution	Added to Fees
Zip_	Country Zip /	Country	1.2	8. This corporation owes the current year Inte	angible
24 804		_	US	Personal Property Tax.	∐Yes □No
24 0	9. Name and Address of Current Registered Agent	1.—		10. Name and Address of New Registered	Agent
81 Name					
C T CORPORATION SYSTEM					
1200 SOUTH PINE ISLAND ROAD			Street Addre	ess (P.O. Box Number is Not Acceptable)	
PLANTATION FL 33324					<del></del>
,	11/11/01/11 6 00061	00			
		84	City		85 Zip Code
				FL	<del>                                     </del>
11. Pursuant	to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, egistered agent, or both, in the State of Florida. Such change was auth	the above	e-named corpo	pration submits this statement for the purpose of	changing its registered
office or r	egistered agent, or both, in the State of Florida. Such change was auth m familiar with, and accept the obligations of, Section 607.0505, Florida	a Statutes	e corporation	a board of directors. I hereby accept the appoin	
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re	gistered Ager	nt signature required		
12.	OFFICERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	PC DELETE	1.1 TITLE		·	☐ Change ☐ Addition
NAME	JENKINS, J. MICHAEL	1.2 NAME			
STREET ADDRESS	14103 DENVER WEST PKWY	13 STREET	TADDRESS 14	123	
	GOLDEN CO 80401	1.4 CITY-S	"		
CITY-ST-ZIP	D DELETE	2.1 TITLE	1-21		Change Addition
		2.2 NAME			
NAME	HARRELD, BRUCE			123	
STREET ADDRESS	14103 DENVER WEST PKWY		1.	125	
CITY-ST-ZIP	GOLDEN CO 80401	2.4 CITY-5	ST-ZIP		Change Additi
TITLE"	V DELETE	3.1 TITLE	$V_{i}$	Conn	□ change ★ Addin
NAME	LINK, MARK	3.2 NAME	101	ring, aregulatest Dra	$\sim$
STREET ADDRESS	14103 DENVER WEST PKWY	3.3 STREE	TADORESS 14	ning, Greg 123 Denver West Ptn 40 Iden Co 80401	7
CITY-ST-ZIP	GOLDEN CO 80401	3.4. CITY-5	ST-ZIP <i>C</i>	holden Co 80401	
TITLE	☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREE	TADORESS		
CITY-ST-ZIP		4.4 CITY-S			
TITLE	DELETE	5.1 TITLE			☐ Change ☐ Additi
		5.2 NAME			
NAME			T ADDRESS		
STREET ADDRESS			i		
CITY-ST-ZIP		5.4 CITY-S	1-217		Change Addition
ΠTLE	☐ DELETE		ŀ		□ Change □ Model
NAME		6.2 NAME			
STREET ANDRESS		6.3 STREE	TADORESS		

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.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

303-216-5108