## 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 # F97000003304 (9)

RTM ENTERPRISES OF GEORGIA INC.

## **FILED** May 20 1998 8:00am Secretary of State

Principal Place of Business Mailing Address				# <b>64</b>		
5995 BARFIELD RD. 5995 BARFIELD RD. ATLANTA GA 30328 ATLANTA GA 30328						
				DO NOT WRITE IN THIS  3. Date Incorporated or Qualified	SPACE.	
2. Principal Place of Business	2a. Mailing Address			<b>06/12/1997 4.</b> FEI Number	Applied For	
<b>⊢</b> , '	26			58-1165941	Not Applicat	
Suite, Apt. #, etc.					\$8.75 Additional	_
22				5. Certificate of Status Desired	Fee Required	
City & State	& State City & State			6. Election Campaign Financing	\$5.00 May Be	$\neg$
	28			Trust Fund Contribution	Added to Fees	
Zip Country	Zip Country		try	8. This corporation owes or has paid the co		
24 25 25				Personal Property Tax due June 30. Yes No		
9. Name and Address of Current Re	gistered Agent		11 Name	10. Name and Address of New Registered	Agent	
C T CORPORATION SYSTEM		`	Name			
1200 SOUTH PINE ISLAND ROAD		8	Street Add	ress (P.O. Box Number is Not Acceptable)	<u> </u>	
PLANTATION FL 33324			3			
		8	City	FI	85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 an	d 607 1508. Florida Statu	tos, the abo	ve-named corr	poration submits this statement for the purpose	of changing its registere	ed
office or registered agent, or both, in the State of F agent. I am familiar with, and accept the obligation	londa. Such change was	authorized	by the corpora	tion's board of directors. I hereby accept the ap	pointment as registered	Ĭ.
	a or, section don addo, i	ionda otatoi	icio,			
SIGNATURE Signature, typical or printed name of regetion as a jest are	: No e if apply able (NO	TE Registered A	Agent signature requi	red when reinstaling) DATE		-  -
12. OFFICERS AND OIL		13.		ADDITIONS/CHANGES TO OFFICERS AN		
TITLE DP	☐ DELETE				Change Additi	ion
NAME UMPHENOUR, RUSSELL V JR.		12 NAM	lE			5
STREET ADDRESS \$995 BARFIELD RD.			EFT ADDRESS			Įŭ
CITY-S1-ZIP ATLANTA GA 30328	DELETE	_	- ST - ZIP		Change Additi	فِ اِس
NAME COOPER, DENNIS E		2.1 TITLE 2.2 NAM			FT Cligable FT Manua	1011
STREET ADDRESS 5995 BARFIELD RD.		2.3 STREET ADDRESS				
CITY-ST-ZIP ATLANTA GA 30328		2. 4 C(1Y - S1 - Z(P				
TITLE DVS	DELETE	3.1 TITLE			Change Additi	ion
NAME WELCH, J. RUSSELL	- <del></del>	3.2 NAME				
STREET ADDRESS 5995 BARFIELD RD.		3.3 STREET ADDRESS				
CITY-ST-ZIP ATLANTA GA 30328		3.4. CITY-ST-ZIP				
THILE DV	DELETE	4.1 1(1)			Change Additi	ion
NAME BENHAM, DOUGLAS N		4. 2 NAME				
STREET ADDRESS 5995 BARFIELD RD.		4.3 STRE	ET ADDRESS			
CITY-ST-ZIP ATLANTA GA 30328		4.4 CITY	-ST-ZIP			
TITLE	DELETE	5 1 TITLE			Change Addili	on
NAME		. 5.2 NAM	Į.			
STREET ADDRESS			ET ADDRESS			
CITY-ST-ZIP	D STIEST	5.4 CITY	<del>`</del>		TT Access to The second	
TITLE	☐ DELETE	6 1 THLE			Change Additi	on
NAME OVEREZ ADDRESS		6.2 NAME				
STREET ADDRESS			ET ADDRESS			
CITY-ST-ZIP  14. I hereby certify that the information supplied with the	is filing done not austitut	or the even		Continu 110 07/21/3) Florido Statutas I furibar a	perify that the informatic	

indicated on this annual report or supplicmental 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 attack with the corporation of the receiver of the recei