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 # F9800001265 1. Corporation Name

HUNTINGTON RESTAURANTS GROUP, INC.

FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90015 018 ***150.00

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				-			
Principal Place	e of Business	Mailing Address					
6560 N. SCOTTSDALE ROAD. #G-206 6560 N. SCOTTSDALE ROAD. # SCOTTSDALE AZ 85253 SCOTTSDALE AZ 85253		D. #G-20	#G-206		DO NOT WRITE IN THIS SPACE		
							٦
		· 				3. Date incorporated or Qualifed 03/05/1998	
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied For]
21		26				93-1020717 Not Applicable	1
Suite, Apt.	#,:etc	Suite-Apt-#; etc	~_~			5. Certificate of Status Desired \$8.75 Additional	1
22		27				Fee Required	1
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be	1
23		28				Trust Fund Contribution Added to Fees	1
Zip	Country	Zip	Cou	intry		8. This corporation owes the current year Intangible	
24	25		30			Personal Property Tax. Yes No	1
···	9. Name and Address of Current	Registered Agent	•			10. Name and Address of New Registered Agent	┨
55.1	MIC MOLLADO			81	Name	1	
BEATTIE, RICHARD 1150 TARPON CENTER DRIVE STE 704 VENICE FL 34185		4		82	Street A	Address (P.O. Box Number is Not Acceptable)	1
		•		83	···		1
				84	City	EL 85 Zip Code	1
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508. Florida Statute	s. the a	bove	-named o	d corporation submits this statement for the purpose of changing its registered	1
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligation	'Florida. Such change was au	thorized	í bv t	he corpoi	poration's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE:	Registered	Agent	signature rec	required when reinstating) DATE	
12.	OFFICERS AND	DIRECTORS	13.		•	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12]
TITLE	PCD	☐ DELETE	1,1 TT	TLE		Change Addition]
NAME .	BEATTIE, RICHARD		1.2 NA	WE	1		
STREET ADDRESS	6560 N. SCOTTSDALE ROAD #0	3-206	1.3 ST	REET	ADDRESS	3,	
CITY-ST-ZIP	SCOTTSDALE AZ		1.4 CI	TY-ST	-ZIP		
TITLE	VD	☐ DELETE	2.1 TI			Change Addition	1
NAME _	BEATTIE, GLENN		2.2 N	AME.			
_STREET ADDRESS	=6560 N=SCOTTSDALE ROAD #0	206	2.3 ST	REET	ADDRESS =		. _
CITY-ST-ZIP	SCOTTSDALE AZ			ITY-ST			12
TITLE	S	☐ DELETE	3.1 111			Change Addition	1
NAME	BEATTIE, MICHELLE		3.2 NA	ME			
STREET ADDRESS	6560 N. SCOTTSDALE ROAD #0	-206	3.3 ST	REET	ADDRESS		
CITY-ST-ZIP	SCOTTSDALE AZ		ŀ	ITY-ST			
TITLE	\ \	☐ DELETE	4.1 TI			☐ Change ☐ Addition	1
NAME	\ 1		4.2N				
STREET ADDRESS	<u> </u>				ADDRESS		ļ
	•			TY-ST			-
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TT		-217	☐ Change ☐ Addition	1
NAME			5.2 NA		ŀ		
STREET ADDRESS		•			ADDRESS		
· [TY-ST-	i		1
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TII			☐ Change ☐ Addition	1
·			6.2 NA			_ starge	}
NAME					ADDRESS		ĺ
STREET ADDRESS							1.
CITY-ST-ZIP			0.4 CI	TY-ST-	- 시٢		1

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 one an attachment with an address, with all other like empowered.

SIGNATURE: