PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G68861

1. Corporation Name

GOLDEN GATE DAIRY QUEEN, INC.

Principal Place	e of Business	Mailing Address									
4895 GOLDEN G		4895 GOLDEN GATE PKW)	Y								
GOLDEN GATE FL 34116 GOLDEN GATE FL 34116 US US					DO	NOT WRIT	E IN THIS	SPACE	Ē		
us		00				3. Date Incorporated of	r Qualifed				
						11/14/1983					
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number				Арр	lied For
11		26			59-2320762				Not	Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired			\$8.	75 A	dditional
2		27				5. Certificate of Status	Desired		F€	e Rec	uired
City & State	=	City & State				6. Election Campaign	Financing		\$5	.0 <mark>0</mark>	Лау Ве
23		28	28			Trust Fund Contribu	ıtion		Ad	ded to	Fees
Zip	Country	Zip	Coun	itry		8. This corporation ow	es the curre	ent year Inta			
4	25	29	30			Personal Property T			Yes		No
	9. Name and Address of Curre	nt Registered Agent		04 11		10. Name and Address	s of New R	egistered /	Agent		
ADTI	IN ITS NAME I LANGE TO			81 Na	me						
	HUR, WILLIAM E.			82 Str	eet Addre	ss (P.O. Box Number is N	lot Accepta	ble)			
	22ND PLACE SW										
NAPL	LES FL 34116		\ \frac{1}{2}	83							
			-	84 Cit	·				85	Zip C	ode
					•			FL	1 1		
_									بللب		
11. Pursuant t	to the provisions of Sections 607.05	02 and 607.1508, Florida Statut	tes, the ab	ove-nan	ned corpor	ration submits this statem	ent for the	nurpose of	hangii htment	ng its r	egistered istered
office or re	to the provisions of Sections 607.05 egistered agent, or both, in the State on familiar with, and accept the oblig	e of Florida. Such change was a	authorized	by the c	ned corpor orporation	ration submits this statem n's board of directors. I he	ent for the ereby accep	nurpose of	hangir otment	ng its r as reg	egistered istered
office or re agent. I an	egistered agent, or both, in the State	e of Florida. Such change was a ations of, Section 607.0505, Flo	authorized orida Statu	by the c tes.	orporation	n's board of directors. The	ent for the ereby accep	purpose of t the appoin	changir ntment	ng its r as reg	egistered istered
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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 dath; 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 any address, with all other like empowered.

64 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

WM, EIARTHOR

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90296 041 ***150.00