FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Saridra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996	To No. 10.	
DOCUMENT # 1. Corporation Name	G85174	

(2)

GRANNY'S PLACE BY THE TRACKS, INC. Principal Place of Business Mailing Address 3235 NO. DIXIE HIGHWAY FT LAUDERDALE FL 33334 FT LAUDERDALE FL 33334					
				 Date Incorporated or Qualified 02/16/1984 	3a. Date of Last Report 05/01/1995
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Suita Ant	A	26		59-2532425	Not Applicable
Suite, Apt. 22 City & State		Suite, Apt. #. etc.		5. Certificate of Status Desired	See Required
23	e	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	Zip	Country	Trust Fund Contribution 8. This corporation has liability for i	Added to Fees
24	25	29	30	Florida Statutes Yes	
	9. Name and Address of Cur	rent Registered Agent		10. Name and Address of New R	egistered Agent
3235 N	, JUDY B DIXIE HWY DERDALE FL 33334		82 Street Add	tress (PO) Howy omber is Not Acceptable 3.6	FI 85 30 COS /
familiar wi	of, and accept the obligations of, S Squarue types of this in a consequent a	ection 607,0505, Horida Statutes.			intment as registered agent. Fam.
12.	DP OFFICERS.	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	CERS AND DIRECTORS IN 12
NAME	TONER, JUDY B.	☐ DELETE	1. 1 THLE		Change Addition
STREET ADDRESS	3235 N DIXIE HWY		1.2 NAM(
CITY-ST-ZIP	FT. LAUDERDALE FL 3333	4	1.3 STREET ADDRESS 1.4 CHY STIZIP		
TITLE	****	[] DELETE	2 1 1/1(Charige Addition
NAME			2.2 NAME		E change E Acciden
STREET ADDRESS			2 3 STREET ADDRESS		
CITY-ST-ZIF			2.4 CiTY+ST+ZIP		
TITLE		DELETE	3 1 TIT.E		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZiP		——————————————————————————————————————	3.4 CiTY - S1 - 2#		
		☐ DELETE	4 I TUTLE		Change Addition
NAME CENTET ADDRESS			4 2 NAME		
STHEET ADDRESS			4.3 STREFT ADDRESS		
CITY+ST-ZIP TITLE		ET ne etc	4 4 CHY - ST 7 P		
NAME		[]] DELETE	\$ 1 TOLE		Change 🗋 Addition
STREE! ADDRESS			5.2 NAME		
CITY-ST-ZIP			5.3 STREET ADDRESS		
TATLE		DELETE	5.4 CITY - S1 - ZIP 6.1 TITLE		
NAME		Clottert			Change Addition
STREET ADDRESS			6.2 NAME		
CITY-ST-ZIP			6.3 STREET ADDRESS		

14. Ido hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(x), Florida Statutes. I further certify that the information indicated on this 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 attrachment with an address.

SIGNATURE:

SIGNATURE AND VPEO OR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-5-96