

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # G97627 (5)
 1. Corporation Name
VARMAC RESTAURANTS, INC.



Principal Place of Business 4961 SW 74 CT MIAMI FL 33155	Mailing Address 4961 SW 74 CT MIAMI FL 33155-4471
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3. Date Incorporated or Qualified 04/02/1984	3a. Date of Last Report 04/10/1996
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2. Principal Place of Business 21. Suite, Apt. #, etc. 22. City & State 23. Zip	2a. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip
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4. FEI Number 59-2416495	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**RODRIGUEZ, ANGEL R.
 7175 SW 8TH STREET
 SUITE 218
 MIAMI FL 33184**

10. Name and Address of New Registered Agent
 81. Name
 82. Street Address (P.O. Box Number is Not Acceptable)
 83.
 84. City **FL** 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	RODRIGUEZ, ANGEL R.	
STREET ADDRESS	13214 SW 13TH ST	
CITY - ST - ZIP	MIAMI FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	RODRIGUEZ, GLADYS V.	
STREET ADDRESS	13214 SW 13TH ST	
CITY - ST - ZIP	MIAMI FL	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	RODRIGUEZ, ALEX C	
STREET ADDRESS	1459 ROBBIA AVE.	
CITY - ST - ZIP	CORAL GABLES FL	
TITLE	VTD	<input type="checkbox"/> DELETE
NAME	RODRIGUEZ, ROY	
STREET ADDRESS	15385 SW 104 TERR., #1	
CITY - ST - ZIP	MIAMI FL	
TITLE	ASD	<input type="checkbox"/> DELETE
NAME	RODRIGUEZ, VIVIAN	
STREET ADDRESS	13214 S.W. 13TH STREET	
CITY - ST - ZIP	MIAMI FL	
TITLE	ATD	<input type="checkbox"/> DELETE
NAME	RODRIGUEZ, ISA	
STREET ADDRESS	1459 ROBBIN AVE	
CITY - ST - ZIP	CORAL GABLES FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do 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.

SIGNATURE: *Angel R. Rodriguez* Date: 4/24/97 (305) 661-0024
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # 0209360

CR2E034 (9/96)