

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # H62731

(5)

1. Corporation Name

BROTHER'S BARBECUE, INC.

Principal Place of Business

C/O JOHN R. GRIFFITH
115 S MISSOURI AVE
LAKELAND FL 33801-4632

Mailing Address

C/O JOHN R. GRIFFITH
115 S MISSOURI AVE
LAKELAND FL 33801-4632



3. Date Incorporated or Qualified
06/18/1985

3a. Date of Last Report
06/28/1995

2. Principal Place of Business

2a. Mailing Address

21 1046 Martin Luther King, Jr. Avenue
22 Suite, Apt. #, etc.

26 1046 Martin Luther King Jr. Avenue
27 Suite, Apt. #, etc.

4. FEI Number

59-2571034

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

23 Lakeland, Florida

28 Lakeland, Florida

24 33805-4404 25 USA

29 33805-4404 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GRIFFITH, JOHN R.
115 S MISSOURI AVE
LAKELAND FL 33802

81 Name Mary L. Harris

82 Street Address (P.O. Box Number is Not Acceptable)
1803 Lake Deeson Drive

83

84 City Lakeland

FL 85 Zip Code 33805

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 607.0503, Florida Statutes.

SIGNATURE: Mary L. Harris

1/31/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE VTSD
12 NAME LEWIS, GEORGE, JR.
13 STREET ADDRESS 1410 N MONTROSE AVE
14 CITY, ST, ZIP LAKELAND FL

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY, ST, ZIP

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY, ST, ZIP

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY, ST, ZIP

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY, ST, ZIP

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY, ST, ZIP

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY, ST, ZIP

21 TITLE PD
22 NAME Mary L. Harris
23 STREET ADDRESS 1803 Lake Deeson Drive
24 CITY, ST, ZIP Lakeland, Florida 33805

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY, ST, ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY, ST, ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY, ST, ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Mary L. Harris
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/96 941-688-5303

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