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

PROFIT CORPORATION ANNUAL REPORT

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

## **FILED** Mar 11 1998 8:00am Secretary of State

PLAZA	RESTAURANT, INC.								
Principal Place	e of Business	Mailing Addre	SS.			-{	HI OLDIN EVENT OLDIK		
#2 Marina Plaza #2 Marina Plaza Sarasota Fl 34236 Sarasota Fl 34236						DO NOT WOLL	T IN THIS SDAY	<b>-</b>	
						DO NOT WRITE  3. Date Incorporated or Qualified	IN THIS SPAC	<u>,c</u>	<del></del>
						1			
2. Principal P	lace of Business	2a. Mailing Ad	dress			01/15/1986 4. FEI Number		An	plied For
21		26				59-2645658			t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			#, etc.				□ \$		Additional
27						5. Certificate of Status Desired		Fee Re	quired
City & State	e	City & State	City & State			6. Election Campaign Financing			May Be
23	28	Zip Country			Trust Fund Contribution		Added t		
Zip	Country	Zip	<b>⊢</b> ~			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
24	9. Name and Address of Curr	[29] ent Registered Agen	30	l		10. Name and Address of New Re			1 MO
00	<del></del>			81	Name	10.			
	AHAM, JACK W								
#2 Marian Plaza Sarasota fl 34236				82	Street Addre	ess (P.O. Box Number is Not Acceptal	ole)		
SAI			63						
				<u></u>	Oh			T 4:- /	20.4-
				84	City		FL  85	Zip C	200e
11. Pursuant to office or to agent. I al	to the provisions of Sections 607.0 egistered agont, or both, in the Sta m familiar with, and accept the obl	502 and 607.1508, Flo ite of Florida, Such chi igations of, Section 60	orida Statutes, ti ange was autho 07.0505, Florida	the above orized by a Statutes	named corporation	oration submits this statement for the pon's board of directors. I hereby acce	purpose of cha pt the appointn	nging its nent as	s registered registered
SIGNATURE									
	Signature, typed or printed name of registered a		(NOTE Flee		nt signature require		DATE		
12.		ND DIRECTORS	DELETE	13.	<del> </del>	ADDITIONS/CHANGES TO OFFICE		ECTOR: Change	S IN 12
TITLE NAME	VPT	L	DELETE	1.1 TITLE 1.2 NAME				лыцю	LI ADDITION
STREET ADDRESS	Graham, J. W. #2 Marina Plaza			1.3 STREET ADDRESS					ļ.
CITY-ST-ZIP	SARASOTA FL		1.4 CITY - ST - ZIP						
TITLE	PSD	———	DELETE 2.1 TOT		- 211			Change	Addition
NAME	SULLIVAN, H. LEE	<del>-</del>		2.2 NAME			_		
STREET ADDRESS	#2 MARINA PLAZA		2.3 STREET ADORESS						
CITY-ST-ZIP	SARASOT FL		2. 4 CITY-ST-ZIP					1	
TITLE			DELETE	3.1 TITLE				Change	Addition
NAME				3.2 NAME					
STREET ADDRESS			Į	3.3 STREET	ADDRESS				
CITY-ST-ZIP				3.4. CITY-S	T-ZIP				
TITLE		لــا		4.1 TITLE			Ц	Change	☐ Addition
NAME				4. 2 NAME					
STREET ADDRESS				4.3 STREET					
CITY-ST-ZIP	<del></del>	<del></del>	DELETE	4.4 CITY - ST	r-ZIP			*hann	Addition
TITLE			1	5.1 TITLE	}		البا	Change	Addition
NAME OTDECT ADDOCCO				5.2 NAME	ADDDECC				
STREET ADDRESS				5.3 STREET	l l				
CITY-ST-ZIP TITLE				5.4 CITY-ST	- 417		<del></del>	Change	Addition
NAME			1	62 NAME				/- · <b>J</b> -	
STREET ADDRESS				6.3 STREET	ADDRESS				-
CITY-ST-ZIP				6.4 CITY-S1					
	ertify that the information supplied	with this filing does no				Section 119.07(3)(i), Florida Statutes. I	further certify I	hat the	information

GNATURE:

Notice of the same legal effect as if made under only the 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 planged, or on an atlachment with an address.

GNATURE:

| STORYTHE AND TYPE OR PRINTED NAME OF STORYTHOLD STORYTH OF STO