

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **J01628 (3)**

1. Corporation Name
STEAK HOUSE CONSTRUCTION CORPORATION



Principal Place of Business: **2113 FLORIDA BLVD. NEPTUNE BEACH FL 32266**
Mailing Address: **2113 FLORIDA BLVD. NEPTUNE BEACH FL 32266**

3. Date Incorporated or Qualified: **02/27/1986**
3a. Date of Last Report: **05/01/1995**
4. FEI Number: **59-2730457**
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

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

**ALEXANDER, EDWARD B JR.
2113 FLORIDA BLVD
NEPTUNE BEACH FL 32233**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: **FL 85**

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: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TYPE: P	<input type="checkbox"/> DELETE	1.1 TITLE: PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: CHRISTMAN, LEWIS E. J		1.2 NAME:	
STREET ADDRESS: 2113 FLORIDA BLVD		1.3 STREET ADDRESS:	
CITY-STATE: NEPTUNE BEACH FL		1.4 CITY-STATE-ZIP:	
TYPE: DV	<input type="checkbox"/> DELETE	2.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: SMITH, WILLIAM STANLEY		2.2 NAME:	
STREET ADDRESS: 2113 FLORIDA BLVD		2.3 STREET ADDRESS:	
CITY-STATE: NEPTUNE BEACH FL		2.4 CITY-STATE-ZIP:	
TYPE: TS	<input type="checkbox"/> DELETE	3.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME: ALEXANDER, EDWARD B.		3.2 NAME:	
STREET ADDRESS: 2113 FLORIDA BLVD.		3.3 STREET ADDRESS:	
CITY-STATE: NEPTUNE BEACH FL		3.4 CITY-STATE-ZIP:	
TYPE:	<input type="checkbox"/> DELETE	4.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		4.2 NAME:	
STREET ADDRESS:		4.3 STREET ADDRESS:	
CITY-STATE:		4.4 CITY-STATE-ZIP:	
TYPE:	<input type="checkbox"/> DELETE	5.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		5.2 NAME:	
STREET ADDRESS:		5.3 STREET ADDRESS:	
CITY-STATE:		5.4 CITY-STATE-ZIP:	
TYPE:	<input type="checkbox"/> DELETE	6.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		6.2 NAME:	
STREET ADDRESS:		6.3 STREET ADDRESS:	
CITY-STATE:		6.4 CITY-STATE-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: *Edward B Alexander Secretary* 1-18-96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)