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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # J14490

(3)

GLADES RESTAURANT ASSOCIATES, INC.

## **FILED** Mar 05 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					I 1884/14 BIBL (1881) BIBLI (1881) BIBLI B		
7777 GLADES BOCA RATOR	s road. Suite 310 N FL 33434	7777 GLADES ROAD. SUITE 310 BOCA RATON FL 33434		DO NOT WRITE IN TI	HIS SPACE		
					3. Date Incorporated or Qualified		
				.,, ,,=	05/15/1986		
2. Principal P	Place of Business	2a, Mailing Address			4. FEI Number	Applied	
21		26			59-2679608	Not App	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	ertificate of Status Desired X \$8.75 Additional Fee Required		
City & Stat	e	City & State		6. Election Campaign Financing \$5.00 May Be			
23		28			Trust Fund Contribution	Added to Fee	
Zip	Country	Country Zip C		ntry	8. This corporation owes or has paid the current year Intangible		
24	25	29	30		Personal Property Tax due June 30.		
	9, Name and Address of Curre	nt Registered Agent			10. Name and Address of New Register	red Agent	
SC	CHMIER, ROBERT J.			81 Name			
77	77 GLADES ROAD		į	82 Street Add	dress (P.O. Box Number is Not Acceptable)		
ST	E 310				<u> </u>		
B0	ICA RATON FL 33434			83			i
				84 City		85 Zip Code	
44 D	4.46	00 d 007 4500 Florido Over		1			1000000
office or r	to the provisions of Sections 607.05 registered agent, or both, in the State am familiar with, and accept the oblig	of Florida. Such change was Jarions of, Section 607.0505, Fl	authorized authorized Iorida Stati	by the corporates	rporation submits this statement for the purpos ation's board of directors. I hereby accept the	appointment as regist	lered
SIGNATURE	1/4/10/1/	L/L		1/0		178	• }
				gent gnature req	guired when reinstating) DA	<u> </u>	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	···	
TITLE	DP	☐ DELET <b>E</b>	1.1 1/1			L Change L	Addition
NAME	SCHMIER, ROBERT J.		1.2 NA	ME .			i
STREET ADDRESS	7777 GLADES RD #310		1.3 ST	REET ADDRESS			Į,
CITY-ST-ZIP	BOCA RATON FL			Y-ST-ZIP		- <del> </del>	
TITLE	VSD	☐ DELETE	2.1 TIT	TE		☐ Change ☐	Addition
NAME	FEURRING, DOUGLAS R.		2.2 NA	ME			
STREET ADDRESS	7777 GLADES RD #310		2.3 ST	reet aodress			
CITY-ST-ZIP	BOCA RATON FL		2, 4 CI	TY-ST-ZIP			
TITLE	TDV	☐ DELETE	3.1 717	LE		Change	Addition
NAME	WIENER, ELLIOTT M.		3.2 NA	ME			ļ
STREET ADDRESS	7777 GLADES RD #410		3.3 ST	REET ADDRESS			ŀ
CITY-ST-ZIP	BOCA RATON FL		3.4. CI	TY-ST-ZIP			
TITLE		DELETE	4.1 TIT	LE		Change	Addition
NAME			4. 2 N/	IME			
STREET ADDRESS			4.3 ST	REET ADDRESS			
CITY-ST-ZIP			4.4 C(1	Y-ST-ZIP			
TITLE		☐ DELETE	5.1 TIT	LE		☐ Change ☐	Addition
NAME			5.2 NA	ME			İ
STREET ADDRESS			5.3 ST	REET ADDRESS			
CITY-ST-ZIP			5.4 CI1	Y-ST-ZIP			
TITLE		DELETE	6.1 TIT			Change	Addition
NAME			6.2 NA	ME			
STREET ADDRESS			6.3 ST	REET ADDRESS			)
CITY-ST-ZIP				Y-ST-ZIP	·		

14. I 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 of supplemental annual report of 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 impowered 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 attachprent with an address.

1/12/00