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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

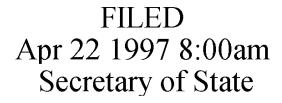
Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # J43368

(6)

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ration Name	• . • • • •
S RESTAURANT	CORP.





Principal Place of Business Mailing Address  5102 S STATE RD 7  5102 S STATE RD 7  5104 S STATE RD 7										
FY LAUDERDALE FL 33314 FT LAUDERDALE FL 33314-5744						3. Date Incorporated or Qualified 3a. Date of Last Report 04/08/1996				
2 Princina	I Place of Business	2a. Mailing Address				4. FEI Number	V-7/-	70/ 100	Applied For	<u>-</u> {
21		26				65-0000471			Not Applica	
	pt #, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.7	5 Additional	~
22		27				5. Certificate of Status Desired			Required	
City & St	tate	City & State				6. Election Campaign Financing	П		00 May Be	
<b>Z</b> ip	Country	28 Zip	Cou	ntrv	· · · · · · · · · · · · · · · · · · ·	Trust Fund Contribution			ed to Fees	
24	25	29	30	Huby		8. This corporation has liability for in Florida Statutes	rangible Yes		r s. 199.032	-1
24	9. Name and Address of Curi		[30]	Γ.		10. Name and Address of New Reg				
G	ERACE, ALFRED			81	Name		<del></del>			$\neg$
	911 NE 1ST TERR		1	82	Stroot Addr	ess (P.O. Box Number is Not Acceptab	(6)		***************************************	
	T LAUDERDALE FL 33334			02	Sileer Addi	ess (r.o. box nomber is not Acceptab	10)			
				83						
}				84	City			85 Z	ip Code	
			ĺ	-	Unity		FL		.p 0000	
SIGNATURI	E Signature, typed or perfed name of registered	agent and sile Capp loable. (N	OTE: Registere			ion's board of directors. I hereby accepted when reinstating)	DATE			
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND			
THLE	DP	☐ DELETE	1.1 7)					Chang	ge 🔲 Addi	ition
NAME	GERACE, ALFRED		1.2 N							
STREET ADDRES					ADDRESS					
CITY-ST-ZIP	FORT LAUDERDALE FL DVS	DELETE	1.4 Ci		ST-ZIP			☐ Charic	ge Addi	ilina
TITLE NAME	GERACE, PATRICIA R.		2.1 H		}			LJ CHAILE	le 🗀 You	ווטווו
STREET ADDRES					ADDRESS	•				
CITY - ST - ZIP	FT. LAUDERDALE FL				ST-ZIP					
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NAME		<del>-</del> -	3.2 N			•		-		
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Trile		DELETE	4.1 TI	TLE				Chang	ge Add	ition
NAME			4. 2 N	AME						
STREET ADDRES	58		4.3 \$	TREET	ADDRESS					
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NAME	TO		6.2 N		I ADDDEGG					İ
STREET ADDRES	22				ADDRESS					
C/TY+ST+ZIP	1		6.4 C	IY-S	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.