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

PROFIT CORPORATION ANNUAL REPORT 1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(2)

CAPTAIN JIMMY'S SUB-STATION NO. 7, INC.

Principal Place of Business	Mailing Address	
8200 N.W. 14TH ST Miami FL 33126	8200 N.W. 14TH ST Miami Fl 33126	
2. Principal Place of Business	2a. Mailing Address	

FILED Apr 29 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							
8200 N.W. 14TH ST 8200 N.W. 14TH ST							
MIAMI FL 3	MIAMI FL 33126 MIAMI FL 33126			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified	
						11/24/1986	
2. Principal P	lace of Business	2a. Mailing Address					pplied For
21		26	s]			59-2776292 N	ot Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.	Suite, Apt. #, etc.				Additional
22		27				Fee R	equired
City & State	ө	h	City & Stale				May Be
23		[28]					to Fees
Zip	Country	Zφ	⊢ ′			8. This corporation owes or has paid the current year In	
24	25 9. Name and Address of Current	.1=-1	30		··	Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent	□ No
	ARON, DAVID	Hogistored Agorit		81	Name	10, Hallo and Ragioss of New Hogistelou Agent	
_							
1220 BALBOA COURT FT. LAUDERDALE FL 33326			82 Street Address (P.O. Box Number is Not Acceptable)				
FI. LAUDENDALE FL 33320							
			L				- <u></u> .
				64	City	FL 85 Zip	Code
11. Pursuant	to the provisions of Sections 607 0502	and 607.1508, Florida Statute	s, the ab	ove-	named corpo	oration submits this statement for the purpose of changing on's board of directors. I hereby accept the appointment as	its registered
agent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505, Flo	rida Statu	ites.	ind corporatio	and board of directors. From by decopy are appointment as	regiolorea
SIGNATURE	Signature typed or printed name of registerial agent	and the if applicable (NOTE	Registered	Apeni	I signature required	ti when reinstating) DATE	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	RS IN 12
TITLE	DP .	DELETE	1.1 TITL	LE		Change	Addition
NAME	BARON, DAVID		1.2 NAM	ME		•	1:
STREET ADDRESS	1220 BALBOA COURT		1.3 STR	IEET A	DDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CIT	Y-ST-	-ZiP		
TITLE	DST	DELETE	2.1 TITLE			☐ Change	Addition
NAME	Baron, Keith		2.2 NA	ME			j
STREET ADDRESS	713 VERONA CT.		2.3 STREET A		DORESS		
CITY-ST-ZIP	FT. LAUDERDALE FL		2.4 CITY-S		- ZIP		
TITLE	VP	☐ DELETE	3.1 1111	LE		☐ Change	Addition
NAME	KEELEY, RICHARD		3.2 NAA	ME			
STREET ADDRESS	8200 N.W. 14TH ST		3.3 STREET ADDRES		DORESS		
CITY-ST-ZIP	MIAMI FL 33126		3.4. CITY - ST - ZIF		- ZIP		
TITLE	TREASURER	☐ DELETE	4.1 TITLE			Change	Addition
NAME	LAURIE YANNACCON	,e	4. 2 NA				
STREET ADDRESS	8200 N.W 145726	W 1457.			DDAESS		
CITY-ST-ZIP	W147'E) 3119E	DELETE	44 CITY-S		- ZIP	☐ Change	Addition
TITLE		TTI DETER	51 TITLE		-	change	Addition
NAME OTRETT ADDRESS			5.2 NAN		000000		
STREET ADDRESS					DORESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY 6.1 TITE		- ZIP	Change	Addition
NAME			6.2 NAS			Change	
					DODLEC		
STREET ADDRESS					DORESS		
CITY-ST-ZIP	and the state of t		6.4 CIT	Y - \$T -	-ZIP	2 - 41 - 440 07/0VD Florida Clabata (4 db - 4 - 4 db - 4 d	7.5

r never certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatic 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:

9.24.98 305-477-9199