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

CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(9)

CHEZ PORKYS RESTAURANTS, INC.

FILED Feb 09 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								-\	IN BIBAN BIBIN BIBIN BIBIN BI	
105 S.W. 6TH STREET 105 S.W. 6TH ST POMPANO BEACH FL 33060 POMPANO BEACH										
								DO NOT WRITE IN THIS SPACE		
								3. Date Incorporated or Qualified		
2. Principal P	lace of Pusin	an Maiti	na Addross				05/28/1987 4. FEI Number		plied For	
	IACE OF DUSII	1055	<u> </u>	2a. Mailing Address				59-2799850	 	t Applicable
Suite, Apt.	# etc		Suite, Apt. #, etc.					_ \$0.75 A		
22	#, GIO.		27				5. Certificate of Status Desired	Fee Re		
City & Stat	e	 	City & State				6. Election Campaign Financing	\$5.00	May Be	
23		28	28				Trust Fund Contribution	☐ Added to		
Zip	ip Country			Zip Country				8. This corporation owes or has paid the current year Intangible		
24	25			9 30				Personal Property Tax due June 3		No .
g. Name and Address of Current Registered Agent								10. Name and Address of New Regi	stered Agent	
DOUGLAS, THOMAS						61	Name			
105 S .W. 6TH S tre et						62	Street Addre	t Address (P.O. Box Number is Not Acceptable)		
POMPANO BEACH FL 33060						_				
						83				
						84	City		85 Zip C	Code
									FL ° Z P	
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										
Signature, typed or printed name of registrined agent and title if applicable (NOTE Regist						i Age	nt signature require	d when re-instating)	DATE	
12.		OFFICERS AN	ID DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICE		
TITLE	POUG			☐ DELETE	1.1 TI				☐ Change	☐ Addition
NAME		LAS, THOMAS		12 NA						
STREET ADDRESS 1424 NE 54TH STREET CITY-ST-ZIP FORT LAUDERDALE FL							ADDRESS			
CITY-ST-ZIP	- TURI	LAUDENDALE FL		DELETE	1.4 CI 2.1 TI		T- ZIP		Change	Addition
TITLE	DZIAN	INIEK DADEK							onlings	
NAME	DZIAMALEK, DAREK 1695 N.W. 41ST STREET					2 2 NAME 2 3 STREET ADDRESS				
***************************************	DAVI AND DADY EL			2 4 0						
CITY-ST-ZIP TITLE	UNIC	AID I MIN I E		DELETE 31 Ti			01 - ZIP		Change	Addition
NAME					3 2 N/				<u> </u>	
STREET ADDRESS				1			ADDRESS			
CITY-ST-ZIP					34. C					
TITLE	_			☐ DELET £	4.1 Ti				☐ Change	Addition
NAME					4 2 N				-	
STREET ADDRESS					4.3 ST	REET	ADDRESS			
CITY-ST-ZIP					4.4 CI					
TITLE	-			DELETE	5.1 10				☐ Change	Addition
NAME					5.2 NA	ME				
STREET ADDRESS					5.3 ST	REET	ADDRESS			
CITY-ST-ZIP					5.4 CI	[Y-S1	T - ZIP			
TITLE		· · · · · · · · · · · · · · · · · · ·		DELETE	6.1 717	LE			☐ Change	Addition
NAME					6.2 NA	ME				
STREET ADDRESS					6.3 ST	REET	ADDRESS			
CITY-ST-ZIP					6.4 CI					
4.4 I hereby o	ortify that th	a information supplied v	vith this filing d	loes not qualify f	or the exe	mnt	tion stated in S	Section 119.07(3)(i), Florida Statutes, I fu	irther certify that the	information T

reflectly compy that the information supplied with this nimit does not quality to the exemption stated in Section 119.07(5)(f). Florida statutes, intrinsic reflection 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 natic appears in Block 12 or Block 13 if changed, or on an attachment with an address.