PILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J89311

(1)

SPECIALTY RESTAURANTS FLORIDA, INC.

4155 E LA PALMA AVE #250

4155 E LA PALMA AVE #250

ANAHEIM CA

ANAHEIM CA

TALLICHET, CECILIA

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

FILED
Apr 29 1997 8:00am
Secretary of State

Principal Place of Business Mailing Address										
4155 E LA PAL SUITE 250 ANAHEIM CA S		4155 E LA PALMA AVE. SUITE 250 ANAHEIM CA 92807-1857	SUITE 250							
						3. Date Incorporated or Qualified 08/26/1987		ate of Last R 17/1996	leporl	
	Place of Business	2a. Mailing Address			4. FEI Number			oplied For		
21		26				94-3094589	Not Applicable			
Sulte, Apt.		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 / Fee Re	Additional equired	
City & Stat		City & State	 			Election Campaign Financing Trust Fund Contribution		\$5.00 Added t		
Zip 24	Country 25	Zip 29				8. This corporation has liability for intangible tax under s: 199.032, Florida Statutes				
	9. Name and Address of Cur-	rent Registered Agent	1			10. Name and Address of New Reg	Istered	Agent	· · · · · · · · · · · · · · · · · · ·	
THE	THE PRENTICE-HALL CORPORATION SYSTEM INC				lame					
1201 HAYES STREET			Ē	2 S	troot Addro	ss (P.O. Box Number is Not Acceptable	(a)			
	- 105		[- "	areat Addres	ss (1.0. Box Number is Not Acceptable	c)			
TALLAHASSEE FL 32301			8	13						
				14 C	lity			85 Zip (Code	
					•		FL	. 1 1 1		
11. Pursuant office or e agent. I a	to the provisions of Sections 607.0 registered agent, or both, in the Stam familiar with, and accept the ob	0502 and 607.1508, Florida Statut ate of Florida. Such change was digations of, Section 607.0505, Fl	tes, the abo authorized orida Statut	ove-na by the tes.	amed corpo e corporatio	ration submits this statement for the pi n's board of directors. I hereby accep	urpose of t the app	changing it ointment as	ls registered registered	
SIGNATURE								 		
	Signature, typed or printed name of registered			Agent si	gnature required	when reinstating)	DATE	BIBEOTOL	0.111.40	
12. TITLE	PD	AND DIRECTORS DELETE	13.	-		ADDITIONS/CHANGES TO OFFIC	EHS ANL	Change	Addition	
NAME	TALLICHET, DAVID C., JR.								L_J Abbillion	
STREET ADDRESS	4155 E LA PALMA AVE #25	٨		: 1.2 NAME 1.3 STREET ADDRESS						
CITY-ST-ZIP	ANAHEIM CA	U		1.4 CHY-ST-ZIP						
TITLE	VD	DELETE		2.1 TITLE			· · · · · · ·	Change	Addition	
NAME	TALLICHET, CECILIA			2.2 NAME				23 9-		
STREET ADDRESS	4155 E LA PALMA AVE #250		1	2.3 STREET ADDRESS						
CITY-ST-ZIP	ANAHEIM CA		2. 4 CIT	r-\$1- <i>2</i>	IP					
TITLE	AS	☐ DELETE		3.1 TITLE				☐ Change	Addition	
NAME	MCMAHON, JUDITH		3.2 NAM	ΙĖ		·				
STREET ADDRESS	4155 E LA PALMA AVE #25	0	3.3 STR	ET ADE	RESS					
CITY-ST-ZIP	ANAHEIM CA		3.4. CII*	/- \$T- Z	IP.					
TITLE	AT	☐ DELETE	4.1 1111	4.1 TITLE				☐ Change	Addition	
NAME	ROYSE, BOB D.		4, 2 NAN	ΛE						

CITY-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.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 C(1Y - S1 - Z)P

4.4 CITY - ST- ZIP

5.1 TITLE

5.2 NAME

61 TITLE

G.2 NAME 6.3 STREET ADDRESS

DELETE

DELETE

Change

Change

Addition

Addition