

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 APR 16 AM 11:18

DOCUMENT # J89475 (4)

1. Corporation Name

OUTBACK STEAKHOUSE OF FLORIDA, INC.



Principal Place of Business

550 N REO STREET #200
TAMPA FL 33609
US

Mailing Address

550 N REO STREET #200
TAMPA FL 33609
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/27/1987

4. FEI Number

59-2848217

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

KADOW, JOSEPH
550 NORTH REO STREET
SUITE 200
TAMPA FL 33609

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

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 registered agent and 119.07(3)(i) applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CD ☐ DELETE
NAME SULLIVAN, CHRIS T.
STREET ADDRESS 550 N REO STREET, S204
CITY-ST-ZIP TAMPA FL

TITLE PD ☐ DELETE
NAME BASHAM, ROBERT B.
STREET ADDRESS 550 N REO STREET, S204
CITY-ST-ZIP TAMPA FL

TITLE VD ☐ DELETE
NAME GANNON, TIM
STREET ADDRESS 550 N REO STREET, S204
CITY-ST-ZIP TAMPA FL

TITLE VTD ☐ DELETE
NAME MERRITT, ROBERT S.
STREET ADDRESS 550 N REO STREET, S204
CITY-ST-ZIP TAMPA FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Co-Chairman, CEO + D. ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE Co-Chairman, COO + D. ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE Secretary ☐ Change ☒ Addition
5.2 NAME Kadow, Joseph J.
5.3 STREET ADDRESS 550 N. Reo St, #200
5.4 CITY-ST-ZIP TAMPA FL 33609

6.1 TITLE President ☐ Change ☒ Addition
6.2 NAME AVERY, Paul E.
6.3 STREET ADDRESS 550 N. Reo St, #200
6.4 CITY-ST-ZIP TAMPA FL 33609

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 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 amendment with an address.

CR2E034 (10/97)