2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

DOCUMENT # J89475 1. Entity Name OUTBACK STEAKHOUSE OF FLORIDA, INC.						FILE	ED.		
						SECRETARY OF STATES DIVISION OF CORPORATIONS			
						00 APR 13	PM 5: 1.	Ë	
Principal Place of Business Mailing Address						,00 (11 11 10)	11 0. 4	J	
N REO STR		550 N-REO STREET #200 TAMPA FL 33607-5754							
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Principal Pl	lace of Business	3. Mailing Address							
	th West Shore Boulevard	2202 North West Shore Boulevard Suite, Apt. #, etc.			<u>a</u>	DO NOT WRITE			
Suite Apt. Sth Floor	π, etc.	5th Floor							
Taixpastar	Torida	Tampa, Florida			4.	FEI Number 59-2848217			plied For t Applicable
33 <u>6</u> û7	Country USA	32,607	Cour	ntry US	SA 5.	Certificate of Status Desired		B.75 Add	litional
	6. Name and Address of Current I	Registered Agent			7.	Name and Address of New Re	gistered Ag	ent	
			Name Joseph J. Kadow						
KADOW, JOSEPH 5 50 NORTL } REO STREET				Street Addr	ess (P.O. E	Box Number is Not Acceptable) 2202 North West Sh	ore Boul	evard	
SUITE-200				5th Floor					
TAME	PA-FL 33609	_		City		Tampa,	FL	zi 3360	g
	named entity submits this statement to	No. 20 Jacob abaseiga i		od office or yes	-interest of	yent or both in the State of Flori		L	
. The above	named entity submits this statement for	Are breaked or changing to	s regisier	ed omce or ref	gistered ag	0000032		-ממיני	
SIGNATURE .	1//	/				04/24/	<u>/100/40/1</u>	0030	
	Signature, typed of fringed name of registered agent a			ed Agent signature re	equired when r	einstating) 事業業計	.0.00 ·	<u>****15</u>	<u> </u>
	pration is eligible to satisfy its Intangible equirement and elects to do so.	FILE NOW After MAY 1, 20		IS \$150.00	00	10. Election Campaign Fina			0 May Be
•	ria on back)	Make Check Paya				Trust Fund Contribution.	. []	Added	to Fees
1.	OFFICERS AND	DIRECTORS	12.		AI	DITIONS/CHANGES TO OFFIC			3 IN 11
TILE	CD CHILDIAN CHOIC T	☐ Delete	TITL	- 1	/,	NC 4113	_	7 Change	☐ Addition
IAME TREET ADDRESS	SULLIVAN, CHRIS T. 550 <u>N. REO. STREET, S204</u>		NAM	ECT ADDRESS 24	202 N.	West Shore Blvd., 5th	Floor		
ITY-ST-ZIP	TAMPA FL		CITY	Y-ST-ZIP	ampa, I	Florida 33607			
ITLE	CD	☐ Delete	TITL	E			ſ.	Change	Addition
AME Treet address	BASHAM, ROBERT B. 550 N REO STREET, S204		NAM STRI	1	102 NI 3	West Chara Divid 5th	Floor		
ITY-ST-ZIP	TAMPA FL					West Shore Blvd., 5th lorida 33607	FIOOL		
ITLE	VD	☐ Delete	TITL		ampa, r	101104-33007	[Change	Addition
IAME	GANNON, TIM		NAM		202 N	West Shore Blvd., 5th	Floor		
TREET ADDRESS CITY-ST-ZIP	550 N REO STREET, S204 TAMPA FL			- 1		Florida 33607	1,001	7	
ITLE	VID		TITL		unpu, i	101144 33007	[Change	☐ Addition
IAME	MERRITT, ROBERT S.	<u> </u>	NAM	ve				_ `	
TREET ADDRESS	550 N REO STREET, S204					West Shore Blvd., 5th	Floor		
CITY-ST-ZIP	TAMPA FL S		_		ampa,	Florida 33607		Change	Addition
itle ! Iame :	KADOW, JOESPH J	☐ Delete	TITL	AF				T Change	L. Addition
REET ADDRESS 550 NORTH REO STREET, SUITE 200				EET ADDRESS 2	202 N.	West Shore Blvd., 5th	ı Floor		
CITY-ST-ZIP	TAMPA F3 3609		CITY			Florida 33607			
TITLE	P	☐ Delete	TITL	··)	•		τ	7 Change	Addition
AME	AVERY, PAUL E	: 200	NAM		2202 N	West Shore Blvd., 5t	h Floor		
STREET ADDRESS CITY-ST-ZIP	5 50 North Reo Street, Suite Tampa F3 3609			J		Florida 33607	u 1 1001		
12 i boroby o	portify that the information symplical with	this filing does not qualify f	or the exc	mntion stated	Lin Section	119 07(3)(i) Florida Statutes 1	further certif	y that the ir	nformation
 I hereby of indicated of the corchanged, 	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empo or on an attachment with an address, v	this filing does not qualify fi true and accurate and that wered to execute this repor with all other like empowered	or the exe my signa t as requi	emption stated ature shall have ired by Chapte	in Section the same or 607, Flor	119.07(3)(i), Florida Statutes. I legal effect as if made under or ida Statutes; and that my name	further certify ath; that I am appears in I	y that the ir an officer 3lock 11 or	nformation or director Block 12 if