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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

DARREL & OLIVER'S INNOVATIVE RESTAURANT CONCEPT.

INC. Principal Place of Business Mailing Address 2601 EAST ATLANTIC BLVD. 2611 EAST ATLANTIC BLVD POMPANO BEACH FL 33062 POMPANO BEACH FL 33062 3. Date Incorporated or Qualified 3a. Date of Last Report 11/02/1988 01/27/1995 2. Principal Place of Business 4 FEI Number 2a. Mailing Address Applied For 65-0082949 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apl. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box 23 28 Trust Fund Contribution Added to Fees Zφ Country 8. This corporation has liability for intangible tax under s. 199 032 24 Yes No 25 29 30 Florida Statutes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 BROEK, DARRELL Street Address (P.O. Box Number is Not Acceptable) 2601 EAST ATLANTIC BLVD. POMPANO BEACH FL 33062 83 84 City 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 changing was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typied or printed marke of negligibrous agent as dittle mappingable the Herickhood Aport signature required when her at east 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TIPLE DELETE 1 1 Tille Change Addition BROEK, DARREL CR2E034 (NAME 1.2 NAME 2601 E. ATLANTIC BLVD. STREET ADDRESS 1.3 STREET ADDRESS POMPANO BEACH FL CITY - ST - ZIP 1.4 CHY-SI-ZIP DST DELETE Change TITLE 2 1 T TLE Addition SAUCY, OLIVER NAME 2.2 NAME 2601 E. ATLANTIC BLVD. STREET ADDRESS 2.3 STREET ADDRESS POMPANO BEACH FL CHY-ST-ZIP 2.4 CHY+S1+ZIP TITLE DELETE Change 3 I THEE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIF 3.4.0(TY - \$1 - ZIF DELETE TITLE 4 1 THEF ☐ Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-SE-ZIP 4.4 City - ST - ZIF DELETE TITLE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STHEET ADDRESS 5.4 CITY - \$1 - ZIP CITY-ST-ZIF □ DELETE TITLE 6 1 THILE ☐ Change Add tion NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6 4 CITY - ST - ZIP 14. Ido hereby certify that the information supplied with this filling is voluntarly furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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 cath; 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

Dire

Daytone Pf une #

(12/95)

SIGNATURE ED NAME OF SIGNING OFFICER OR DIRECTOR

allachment with an address

oath; that I am an officer of appears in Block 12 or Bio