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

DOCUMENT # K45167

(9)

FIFTH AVENUE GRILL, INC.

FILED Feb 03 1998 8:00am Secretary of State



District Dis						
Principal Place of Business Mailing Address						
821 S.E. 5TH AVENUE P O BOX 790						
P.O. BOX 790	, FL 33447-7790	P.O. BOX 790 DELRAY BEACH FL 33447-0790				DO NOT WRITE IN THIS SPACE
1		US				3. Date Incorporated or Qualified
						11/15/1988
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For
21	7344444 5 4 4 5 4 4 4 4 4 4 4 4 4 4 4 4 4	26				65-0087826 Not Applicable
Suite. Apt.	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
City & State	and the last of th	Ciby & State				Fee Required
23	B	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip Cauntry		Zip Country				
24	25	29	30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	g. Name and Address of Current	1== 1	100	Т	. ,	10. Name and Address of New Registered Agent
PERRY, MARK A				81	Name	
1	SE 4TH AVENUE			82	Ctrant 4 d	Idean /D O. Day Niverbox in Not Apparetable)
	LRAY BEACH FL 33483			62	Street Ad	dress (P.O. Box Number is Not Acceptable)
				83		
				84	Other.	lon l. Zin Onda
				64	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 primed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling) DATE						
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 1	ITTLE		Change Addition
NAME	THERIEN, JOHN		121	NAME		
STREET ADDRESS	551 S.E. 8TH ST., STE. 503		1 3 STREET		address	
CITY - ST - ZIP	DELRAY BEACH FL 33483		1,4 CITY - ST		-ZIP	
TITLE			. 2,1 1			Change Addition
NAME	BLUM, THOMAS R.		•	NAME		
STREET ADDRESS	OFFIDAY DEADLE COLOR			2.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL 33483	T BOLETO	2, 4 CITY - ST		T-ZIP	Additional
TITLE		DELETE	3.1 TITLE			Change Addition
NAME				NAME.		
STREET ADDRESS			3.3 STREET ADDRESS			` '
CITY-ST-ZIP TITLE				3.4. CITY-ST-ZIP 4.1 TITLE		☐ Change ☐ Addition
NAME		ELL DEELIE		NAME		
STREET ADDRESS					IDDDESC	
CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 City-SI-ZIP			
TITLE		☐ DELETE	5,11		- 211	☐ Change ☐ Addition
NAME				IAME		_ , _
STREET ADDRESS					ADDRESS	+
CITY-ST-ZIP			•	XITY-ST		
TITLE		DELETE	6.1 1			Change Addition
NAME		_		LAME		
STREET ADDRESS					LODRESS .	
CITY - ST - ZIP				HTY-ST		
1		11 1 1111				O THE STATE OF THE

4. I hereby certify that the information supplied with this filling 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 of Block 13 if changed or on an attachment with an address.

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