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FILED
May 07 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K53827 (7)
1. Corporation Name
RUTH'S CHRIS STEAKHOUSE #7, INC.

Principal Place of Business
661 U.S. HWY. ONE
NORTH PALM BEACH FL 33406

Mailing Address
661 U.S. HWY. ONE
NORTH PALM BEACH FL 33406



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

25 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

12/27/1988

4. FEI Number

65-0089244

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$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

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION FL 33324

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 the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PS FERTEL, RUTH ☒ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
711 N BROAD STREET
NEW ORLEANS LA 70119

TITLE T CATHER, JONI ☒ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
6801 WUERPEL
NEW ORLEANS LA 70124

TITLE D RYDER, JIM ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
4144 MONTRACHET DR
KENNER LA 70065

TITLE D BROOKS, PHIL ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
1311 HENRY CLAY
NEW ORLEANS LA 70118

TITLE AS BRINKERHOFF, BECKI ☒ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
17 CHATEAU TALBOT
KENNER LA 70065

TITLE S FERTER, RUTH ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
711 N BROAD
NEW ORLEANS LA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
Hyde, William
Five Great Meadow Road
Locust Valley, NY

2.1 TITLE T ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
Pennison, Thomas
6204 Rosalie Court
Metairie, LA 70003-2058

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE AS ☒ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
Burkart, Jaymie
107 E. Field Court
Mandeville, LA 70471

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 attachment with an address.

SIGNATURE: Jaymie Burkart

Signature, typed or printed name of signing officer or director

CR2E034 (10/97)