FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

1996

DIVISION OF CORPORATIONS

DOCUMENT # K73989

1. Corporation Name

(1)

BRYMAC RESTAURANTS, INC.

PAID 19497



Principa! Place	of Business	Mailing Address				
, ,		•				
4961 SW 741 MIAMI FL 33		4961 SW 74TH CT. Miami Fl 33155				
WINNI I C GO	100	MICHIEL COLOG			3. Date Incorporated or Qualified	3a. Date of Last Report
					03/20/1989	04/19/1995
2. Principal Pla	ace of Business	2a. Mailing Address	,		4. FEI Number	Applied For
21		26		65-0107299	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27				Fee Hequired
City & State		City & State			Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Zip	Country	7ip	Country		This corporation has liability for it	
24	25		30		Florida Statutes	~
<u></u>	g. Name and Address of Curren				10. Name and Address of New R	egistered Agent
			81	Name		
RODRIGUEZ, ANGEL R.			82	Street Addre	ess (P.O. Box Number is Not Acceptab	le)
13214 SW 13TH ST.				Street Addit		
MIAMI FL 33184			83			
			84	City		85 Zip Code
	40 41 400 07 07 07	2.067.4500 Fb. 1d. Oh. A.				FL S E S S S S S S S S
or register	ed agent, or both, in the State of Flori	da. Such change was authorized	the above-r by the corp	oration's boar	ation submits this statement for the pur rd of directors. I hereby accept the appo	pose of changing is registered office bintment as registered agent. I am
famil ar wit	th, and accept the obligations of, Sect	ion 607.0505, Florida Statutes.				
SIGNATURE _	Signature, typical or printed name of registered agent	and the francicable (NOTE	Registered Agen	il signature required	d when reinstating	DATE
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TOLF	PD	☐ DELETE	1 1 THILE			Change Addition
NAME	RODRIGUEZ, ANGEL R.		1.2 NAME			
SCHEEL ADDRESS	13214 SW 13TH ST		13 STREET	ADDRESS		
CHY-SI ZIF			14 CHY-S	T - ZIP		
TIFLE	VO	☐ DELETE	2 1 TITLE			Change Addition
NAME	RODRIGUEZ, ALEX C.		22 NAME			
STREET ADDRESS	1459 ROBBIA AVE			ADDRESS		
City-St-ZiP	CORAL GABLES FL	D DELETE	24 CITY- S	T-ZIP		Change Addition
TIFLE	SD DODDIGHEZ GLADVE V	☐ DELETE	3 1 TITLE			T cutside T variation
NAME ethillandorce	RODRIGUEZ, GLADYS V. 13214 SW 13TH ST		3.2 NAME	AUUDEGG		
STREET ADDRESS	MIAMI FL		3.3 STREET ADDRESS 3.4 CITY-ST-ZIP			
CHY-SI ZIP TILLE	TD	☐ DELETE	4 1 Title		and the same of th	☐ Change ☐ Addition
NAME	RODRIGUEZ, ROY E.	<u></u>	4.2 NAME			
STREET ADDRESS	15385 SW 104TH TERR #1		4 3 STREET	ADDRESS		
CHY-S1-ZIP	MIAMI FL		4.4 CITY-ST-ZIP			
TITLE	ASD	☐ DELETE	5 1 TITLE			Change Addition
NAM6	RODRIGUEZ, VIVIAN L.		5.2 NAME			
STREET ADDRESS	13214 SW 13TH ST		5 3 STREET	ADDRESS		
C-TY-ST-ZIP	MIAMI FL		5 4 CITY-S	T-ZIP		···
TILE	ATD	☐ DEFE1€	6 † TITLE			Change Addition
NAME	RODRIGUEZ, ISA		6 2 NAME			
STREET ADDRESS	1459 ROBBIN AVE		6.3 STREET	ADDRESS		
C-TY-ST-ZiP	CORAL GABLES FL	CANTO D. C. CONTROL CO	64 CITY-S	1-2IP	A LICENSE - 1884 - 19. L. 1887 A 1975 19. C. 1887 18. C. 18. C.	

14. I do hereby certify that the information supplied with this filing is voluntarily 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 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:

NATURE AND TYPED OR PRINTY OF SIGNING OFFICER OR DIRECTOR

1/12/96 (305)661.0024