## 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		
1. Corporatio		. (.)			
IHE (	DLEANDER FAMILY BUFFE	T INC.		l (\$51/5)/ 5\$) ((\$4.5 \$/c) ( 1/50/	a dila della della didiri didiri didiri didiri didiri didiri didiri
		· · - · · · · · · · · · · · · · · ·			
Principal Place of Business		Mailing Address		a seatimit dat state grite tificht (Bit)	n mener menet minter mener mener ments Albeit 1805
10385 SOUTHERN BLVD ROYAL PALM BEACH FL 33411		10385 SOUTHERN BLV			
HUIAL PAL	M BEAUN FL 33411	ROYAL PALM BEACH F	FL 33411		
	702			<ol> <li>Date Incorporated or Qualified</li> <li>09/18/1989</li> </ol>	3a. Date of Last Report 05/01/1995
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# etc	26 Suite And # 444		65-0156085	Not Applicable
22	π, etc.	Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	е	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	
24	25 9. Name and Address of Currel	nt Registered Agent	30	Florida Statutes Yes  10. Name and Address of New R	<i>y•</i>
	g	nt riegistette Agent	81 Name	10. Name and Address of New H	egisterea Agent
ANSTIS, CAROLYN O.					
	B2ND LANE NORTH		82 Street Add	ress (P.O. Box Number is Not Acceptab	le)
WEST PALM BEACH FL 33412			83		
			84 City		
			-		FL 85 Zip Code
11. Pursuant or register	to the provisions of Sections 607.0502 red agent, or both, in the State of Flori	2 and 607.1508, Florida Statutes	s, the above-named corpo	oration submits this statement for the pur and of directors. Thereby accept the appo	pose of changing its registered office
familiar wi	th, and accept the obligations of. Sect	tion 607.0505, Florida Statutes.	a by the corporation a pos	ard or directors. Thereby accept the appo	entment as registered agent. Fam
SIGNATURE	Signators, bipsed or printed name of registered again	والمراجع فعالي والانام			
12.		D DIRECTORS	13.		CIATE
TITLE	DP	DELETE	1 1 IIILE	ADDITIONS CHANGES TO OFFI	CERS AND DIRECTORS IN 12  Change Addition
NAME	ANSTIS, WILLIAM H.		1.2 NAME		
STREET ADDRESS	12609 62ND LANE NO.		1.3 STREET ADURESS		
CITY-ST-7IP	W. PALM BEACH FL		1.4 CITY-ST-ZIP		
TITLE	DVT	☐ DELE.TE	2 1 TUTUE		Change Addition
NAME	ANSTIS, CAROLYN O.		2.2 NAME		
STREET ADDRESS	12609 62ND LANE NO.		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	W. PALM BEACH FL	Figures	2.4 City St zif		T-1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
NAME	DS Anstis, cynthia L.	☐ DELETE	3 1 TITLE		Change Addition
STREET ADDRESS	40000 0000 1 100 000		3 2 NAME		
CITY - ST-ZIP	W. PALM BEACH FL		3.3 STREET ADDRESS		
11!LE	DS	DELETE	3 4 CITY - ST - ZIP 4 1 TIT_E		Change Add-tion
NAME	BICKING, LINDA D		4.2 NAME		☐ Guange ☐ Magrillott
STREET ADDRESS	6324 LANDSDOWNE CR		4.3 STREET ACCRESS		
CITY-ST-ZIP	BOYNTON BCH FL	•	4.4.0(TY-S1 Z#		
THILE		☐ DELETE	5 1 TIFLE		Change Addition
NAME			5.2 NAME		•
STREET ADDRESS			5 3 STREET ADDRESS		
CITY - ST - ZIP		····	5 4 CHY - ST - 7IP		
TITLE		☐ DELETE	€ 1 1III. <del>1</del>		Change Addition
NAME CENTUL ADDRESS			6 2 NAME		
STREET ADDRESS CITY-ST-ZIP			6 3 STREET ADDIRESS		
Unit-31-21P	İ		6.4 CiTy . \$1, 7iP		

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furn shed 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 reduced by Chapter 607. Florida Statutes; and that my name appears in Block 12 or BiOsk 13 if changed, or on an attachment with an address.

SIGNATURE:

Display The Property of the corporation of the corporation of the receiver or trustee empowered to execute this report as reduced by Chapter 607. Florida Statutes; and that my name appears in Block 12 or BiOsk 13 if changed, or on an attachment with an address.

SIGNATURE:

Display The Property of the corporation of the corporation of the corporation of the receiver or trustee empowered to execute this report as reduced by Chapter 607. 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 reduced in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report of the corporation of the

4-28-96 407-790-6465