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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

	996	9, 0,10,0,10,	CORPORATIO					
OCUN Corporation N		08 (1)						
•	BAR-B-QUE OF MADISOI	N, INC.						
Principal Place of Business Mailing Address					T (OOLINDIA BIB DIAM OOLIN DAFII D	DADI HUNI UNUN 1	01014 01 <b>0</b> 14 01011	11EH 011H 1001
1201 W BASE			BROWN					
us		MADISON FL 32340 US		3, Date Incorporated or Qualified 03/28/1990		ote of Last Re 03/16/198	95	
, Principal Plac	e of Business	2a. Mailing Address			4. FEI Number 59-3003306			Applied For Not Applicable
∐ Suite, Aρt. #,	etc.	Suite, Apt. #, etc.			Certificate of Status Desired		\$8.75	Additional Required
City & State		City & State		<u>-</u>	6. Election Campaign Financing		\$5.00	May Be
	T Country	<b>28</b>	Country		Trust Fund Contribution  8. This corporation has liability for			199.032
- <i>2</i> 95 }	Country 25	29	30		Florida Statutes X	es 🗌 No		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	g. Name and Address of Curr			· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New	Registere	d Agent	
			81	Name				
BROWN, WILLIAM FORREST RT. 3, BOX 10			82	Street Add	ress (P.O. Box Number is Not Accept	able)		
	N FL 32340		83					
MADIOOI	1116 02010		84	City			■ 85 Z¤	Code
					oration submits this statement for the ard of directors. Thereby accept the a	F		
			S.					
s	ignative, types or punted name of regreened as OFFICERS A		OTE: Registered Agra	nt signatum requir	ed when reinstating: ADDITIONS/CHANGES TO C	DATE FFICERS AI	ND DIRECTO	RS IN 12
2.		PART A WILLIAM TRANSPORTED TO THE COORS DELETE	OTE: Registered Age	nt signaturo requir	·		ND DIRECTO	PRS IN 12
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centry 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 oorth; that I am an officer or director of the conforation 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR