


FILE NOW: Fee after May 1, will be \$588.75

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 203.75		Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company		DOCUMENT # L94000000090			
KENDALL ROADHOUSE GRILL, L.C. 6600 N. ANDREWS AVENUE SUITE #160 FT. LAUDERDALE FL 33309		1a. Principal Place of Business Address 7199 S.W. 117TH AVE. KENDALL FL 33183			
2. Principal Place of Business SAME		2a. Mailing Address SAME		3. Date Organized or Qualified 02/24/1994	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		3a. State of Formation FL	
City & State		City & State		4. FEI Number 65-0468983	
Zip		Country		5. Date of Last Report 02/15/1996	
7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent			
MOORE, JOHN DAVID JR 4801 S. UNIVERSITY DRIVE SUITE 304 DAVIE FL 33328		Name BARNETT, CHARLES D Street Address (P.O. Box Number is Not Acceptable) 899 W. CYPRESS CREEK RD Suite, Apt. #, etc. SUITE 500 City FT. LAUDERDALE FL Zip Code 33309			
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.					
SIGNATURE <i>Charles D Barnett</i>		DATE <i>1/29/97</i>			
(Registered Agent Accepting Appointment)		(NOTE: Registered Agent signature required when reinstating)			
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM MGR	ROADHOUSE GRILL, INC.	6600 N. ANDREWS AVE. 4801 S. UNIVERSITY DRIVE,		FT. LAUDERDALE, FL DAVIE FL 33309	
MEM	ROADWEAR, INC				
				300002086043--0 -02/13/97--01003--001 *****203.75 *****203.75	
11. I do 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.					
SIGNATURE: <i>By: Charles D Barnett, Secy.</i>		By: <i>CHARLES D. BARNETT</i>		1/29/97	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER		SECRETARY		Date	
				Daytime Phone #	