File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

Name and Mailing Address of Limited Liability Company

DOCUMENT #

L94000000090

KENDALL ROADHOUSE GRILL, L.C. 6600 N. ANDREWS AVENUE SUITE #160

FILED 98 MAY -4 PM 4: 09 SECRETARY OF STATE TALLAHASSEE, FLORIDA

1a. Principal Place of Business Address

KENDALL FL 33183

7199 S.W. 117TH AVE.

FT.	LAUDERDALE	FL 33309			· ·	
2. Principal Place of Business		2a. Mailing Ad	2a. Mailing Address		3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.		Suite, Apt. #, e	Suite, Apt. #, etc.		02/24/1994 4. FEI Number	FL Applied For
City & State		City & State	City & State			Applied For Not Applicable
Zip	Country	Zip	Counti	ry	5. Date of Last Report	6. Certificate of Status Desired SU.75 Additional Fee Required
7. Name and Address of Current Registered Agent				8. Name and Address of New Registered Agent/Office		
BARNETT, CHARLES D 899 W. CYPRESS CREEK RD. SUITE 500 FT. LAUDERDALE FL 33309				Street Address Lolo OC Suite, Apt. #, 6	na De Pietro s (P.O. Box Number 18 Not Acceptate) N. Andrews A	lve, Suite 160

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, any

SIGNATURE

Zip Code

10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGRM ROADHOUSE GRILL, INC. 6600 N. ANDREWS AVE. FT. LAUDERDALE FL MEM ROADWEAR, INC. 6600 N. ANDREWS AVE. FT. LAUDERDALE FL **188.75

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 empowerage 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: