

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

APPROVED AND FILED

55 MAY -1 PM 2:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L96318** (5)

1. Corporation Name
BON APPETIT AT TEMPLE BETH EL, INC.

Principal Place of Business: **333 SW 4TH AVE. BOCA RATON FL 33432**
Mailing Address: **333 SW 4TH AVE. BOCA RATON FL 33432**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Created: **08/10/1990**
3a. Date of Last Report: **11/14/1994**

4. FEI Number: **65-0294067**
Applied For: Applied For
 Not Applicable

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contributor: **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.932 Florida Statutes: Yes No

21. Principal Place of Business	26. Mailing Address
22. State Apt. # etc.	27. State Apt. # etc.
23. City & State	28. City & State
24. Zip	29. Zip
25. Country	30. Country

9. Name and Address of Current Registered Agent

**BRIZEL, ROBERT
1001 IVES DAIRY ROAD
SUITE 204
MIAMI FL 33179**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Applicable)	
83. City	
84. State	85. Zip Code

11. Pursuant to the provisions of Sections 609, 610, and 617, 190F, Florida Statutes, the above named corporation 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 the corporation's board of directors, thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the above named Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

12.1 NAME	D SCHARLAT, HAROLD
12.2 STREET ADDRESS	401 S.W. 57TH AVE
12.3 CITY, STATE, ZIP	HOLLYWOOD FL
12.4 NAME	
12.5 STREET ADDRESS	
12.6 CITY, STATE, ZIP	
12.7 NAME	
12.8 STREET ADDRESS	
12.9 CITY, STATE, ZIP	
12.10 NAME	
12.11 STREET ADDRESS	
12.12 CITY, STATE, ZIP	
12.13 NAME	
12.14 STREET ADDRESS	
12.15 CITY, STATE, ZIP	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

13.1 NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 STREET ADDRESS		
13.3 CITY, STATE, ZIP		
13.4 NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.5 STREET ADDRESS		
13.6 CITY, STATE, ZIP		
13.7 NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.8 STREET ADDRESS		
13.9 CITY, STATE, ZIP		
13.10 NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.11 STREET ADDRESS		
13.12 CITY, STATE, ZIP		
13.13 NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.14 STREET ADDRESS		
13.15 CITY, STATE, ZIP		

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(b), Florida Statutes. I further certify that the information included 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 in person. I am an officer or director of this 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 of this report or on an attached form with an address.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/95
Date
470-250-7111
Tallahassee, Florida