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**CORPORATION ANNUAL REPORT** 

DOCUMENT # L96491

**SELECT RESTAURANTS, INC.** 

(0)

## FILED **PROFIT** May 11 1998 8:00am FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State Secretary of State **1998** DIVISION OF CORPORATIONS



BROSN 3055 S PALM (  11. Pursuant to the office or regist agent. I am fa	H DOWNS BLVD H980  O Business  J. Coll C W. Okive  Occupy  Country  So 25  Name and Address of Curre  MAN, EDWARD  SW MARTIN DOWNS BLVD  CITY FL 34990	Suite, Apt. #, etc.  27  City & Sinte  28  Palm (4)  Zip  29  34946	Country  81 Name E	5. Certificate of Status Desired  6. Election Campaign Financing Trust Fund Contribution  8. This corporation owes or has paid Personal Property Tax due June 3:  10. Name and Address of New Regi	N THIS SPACE  Ap No S8.75 A Fee Re \$5.00 Added to the current year Inte O. Yes	May Be o Fees
2. Principal Place 2. Principal Place 21 467 5 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	e of Business  J. Golf & Okive  Country  Country  So  25  Name and Address of Curre  MAN, EDWARD  SW MARTIN DOWNS BLVD  CITY FL 34990	28. Mailing Address 26. 4877 S.W Suite, Apt. #, etc. 27. City & Spite 28. Palm (4) Zip 29. 34946	Country  81 Name E	3. Date Incorporated or Qualified 08/27/1990  4. FEI Number 65-0213634  5. Certificate of Status Desired  6. Election Campaign Financing Trust Fund Contribution  8. This corporation owes or has paid Personal Property Tax due June 3: 10. Name and Address of New Regil	\$8.75 A Fee Re \$5.00 Added to the current year Inta 0. Yes	t Applicable Additional equired May Be to Fees angible
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BROSN 3055 S PALM ( 11. Pursuant to the office or regist agent. I am la	9. Name and Address of Curre MAN, EDWARD SW MARTIN DOWNS BLVD CITY FL 34990	29 34490 ent Registered Agent	81 Name	10. Name and Address of New Regi		) No
BROSM 3055 \$ PALM (  11. Pursuant to the office or regist agent. I am lay SIGNATURE	MAN, EDWARD SW MARTIN DOWNS BLVD CITY FL 34990	ent Hegistered Agent		-dwar brosins	stered Agent	
3055 S PALM (  11. Pursuant to the office or regist agent. I am fa	SW MARTIN DOWNS BLVD CITY FL 34990					
PALM (  11. Pursuant to the office or regist agent. I am fa	CITY FL 34990		82 Street Add			
11. Pursuant to the office or regist agent. I am fa				ress (P.O. Box Number is Not Acceptable	On	
SIGNATURE			B3	TO IT SIND GOILS INTE	IVI-	
SIGNATURE			84 City		las l 2:0 C	Dada
SIGNATURE			'	PAlm Cody	FL 85 Zip C	170
SIGNATURE	<b>ne provisions of Sections 607.05</b> <b>stared autonit, or both, in the Stat</b>	602 and 607.1508, Florida <b>Sta</b> tut te of Florida, Such chan <b>ce was</b> a	es, the above-named corpora	poration submits this statement for the pur tion's board of directors. I hereby accept	pose of changing its	registered
SIGNATURE	miliar with and adden the obli	gations of Section 607.0505, Flo	orida Statutes.		1.100	ograforad
Signe	Taller Wood of the second as	gent and title if applicable (NOT	Flegistered Agent signature requi	ired when reinelal no)	3/14/	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR	S IN 12
	PO	DELETE	1.1 ¥(TLE		Change	Addition
	BROSMAN, EDWARD	31145	1.2 NAME			
D	<b>30</b> 55 SW MARTIN DOWNS E	SLVU	1.3 STREET ADDRESS			
	PALM CITY FL 34990 VST	DELETE	1.4 CITY-ST-ZIP			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
*****	BROSMAN, MARY H	☐ DECEIE	2.1 TITLE		Change	☐ Addition
	3055 SW MARTIN DOWNS E	BLVD	2.2 NAME			
	PALM CITY FL 34990	50.10	2 3 STREET ADDRESS			
TITLE		☐ DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change	Addition
NAME			3.2 NAME		<b>—</b> •	
STREET ADDRESS			3.3 STREET ADORESS			
CITY-ST-ZIP			3.4 CITY-S1-ZIP			
TITLE		DELETE	4.1 TITLE		☐ Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - 7IP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change	☐ Addition
NAME			52 NAME			
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TITLE	<b>∕</b> 1		6.1 TITLE		Change	Addition
NAME STORET ADDRESS	///	/ /	6.2 NAME			
STREET ADDRESS		//	6.3 STREET ADDRESS 6.4 City - S1 - ZIP			
14. I hereby certify						

te receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in attachment with an address.