

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2004 8:00 am
Secretary of State

02-02-2004 90019 021 ***150.00

DOCUMENT # P02000046301

1. Entity Name
JAT RESTAURANTS, INC.



Principal Place of Business
**124 N. PALMETTO AVENUE
FLAGLER BEACH, FL 32136**

Mailing Address
**P.O. BOX 632
FLAGLER BCH, FL 32136**



2. Principal Place of Business
5 Viscaya Lane

Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

01312004 Chg-P CR2E034 (10/03)

City & State
Palm Coast FL

City & State

4. FEI Number
02-0610749

Applied For
Not Applicable

Zip
32137

Country
U.S.A.

Zip

Country

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

6. Name and Address of Current Registered Agent

**JOHNSON, SCOTT E ESQUIRE
MORAN & SHAMS, P.A.
111 N ORANGE AVE, STE 1200
ORLANDO, FL 32801**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D ☐ Delete
THALL, JOHN
124 N. PALMETTO AVENUE
FLAGLER BCH, FL 32136

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D ☐ Delete
ROBERTSON, MICHELLE
124 N. PALMETTO AVENUE
FLAGLER BCH, FL 32136

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

President ☒ Change ☐ Addition
John Thall
5 Viscaya Lane
Palm Coast FL 32137

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Secretary ☒ Change ☐ Addition
Michelle Thall
5 Viscaya Lane
Palm Coast FL 32137

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

12. I 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #