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Apr 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P03743 (2)

1. Corporation Name
PONLUPA RESTAURANT FINANCING, INC.

Principal Place of Business

P O BOX 224018
TAX DEPARTMENT
DALLAS TX 75222-4018
US

Mailing Address

P O BOX 224018
TAX DEPARTMENT
DALLAS TX 75222-4018
US



3. Date Incorporated or Qualified 10/18/1984
3a. Date of Last Report 04/23/1996

4. FEI Number 31-1111691
Applied For Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21 State, Apt. #, etc.
22 City & State
23 Zip Country
24 25
2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip Country
29 30

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
110 NORTH MAGNOLIA STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

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

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-stating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD	11 TITLE	SD
NAME	MCCARTHY, JAMES W.	12 NAME	TODD M. WATSON
STREET ADDRESS	12404 PARK CENTRAL DRIVE	13 STREET ADDRESS	12404 PARK CENTRAL DRIVE
CITY- ST- ZIP	DALLAS TX	14 CITY- ST- ZIP	DALLAS, TX 75261
TITLE	PC	21 TITLE	
NAME	KAUFMAN, MICHAEL S	22 NAME	
STREET ADDRESS	12404 PARK CENTRAL DRIVE	23 STREET ADDRESS	
CITY- ST- ZIP	DALLAS TX	24 CITY- ST- ZIP	
TITLE	T	31 TITLE	
NAME	WYNNE, DIANA S.	32 NAME	
STREET ADDRESS	12404 PARK CENTRAL DRIVE	33 STREET ADDRESS	
CITY- ST- ZIP	DALLAS TX	34 CITY- ST- ZIP	
TITLE		41 TITLE	AS
NAME		42 NAME	CAROLYN CARPENTER
STREET ADDRESS		43 STREET ADDRESS	12404 PARK CENTRAL DRIVE
CITY- ST- ZIP		44 CITY- ST- ZIP	DALLAS, TX 75261
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY- ST- ZIP		54 CITY- ST- ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY- ST- ZIP		64 CITY- ST- ZIP	

14. 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 or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Carolyn Carpenter CAROLYN CARPENTER ASSISTANT SECRETARY 4-4-97 978-404-5215
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)