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Secretary of State

04-27-1999 90139 014 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P09808

1. Corporation Name

Fast Food Management (P.R.), Inc.

Principal Place of Business First Federal Bldg. Suite 507 Santurce, PR 00909	Mailing Address First Federal Bldg. 1519 Ponce de Leon Ave. Suite 507 Santurce, PR 00909
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1519 Ponce de Leon Ave. Suite, Apt. #, etc. 22 Suite 507 City & State 23 Santurce, PR Zip Country 24 00909 25	2a. Mailing Address 26 1519 Ponce de Leon Ave. Suite, Apt. #, etc. 27 Suite 507 City & State 28 Santurce, PR Zip Country 29 00909 30	3. Date Incorporated or Qualified 04/16/86	4. FEI Number 66-0373225 Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required <input type="checkbox"/> \$5.00 May Be Added to Fees	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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9. Name and Address of Current Registered Agent Arroyo, Enrique 6701 Sunset Dr., Suite 104 South Miami, FL 33143	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
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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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/P Regis, John A. Jr. Kings Court 70, Cond. Prila Apt. 19-A, Santurce, P.R. 00911	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	Regis, Jr., John A. Kings Court 70, Cond. Prila Apt. 19-A, Santurce, P.R. 00911
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/V/S Regis, John A. 600 BLVD de los Arboles, Bz 316 Urb. Arboles de Montehiedra, P.R.	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	Regis, John A. 600 BLVD de los Arboles, Bz 316 Urb. Arboles de Montehiedra, P.R. 00926
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/T Alicea, John B-32 Portal de los Pinos Rio Piedras, Puerto Rico 00928	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	Alicea, John B-32 Portal de los Pinos Rio Piedras, Puerto Rico 00928
TITLE NAME STREET ADDRESS CITY - ST - ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 13, 1999

Date

(787) 725-1814

Daytime Phone #