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CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 10 AM 8:48

DOCUMENT # **P25703** (0)

1. Corporation Name

TPI RESTAURANTS, INC.

Principal Place of Business	Mailing Address
2158 UNION AVE MEMPHIS TN 38104 US	2158 UNION AVE MEMPHIS TN 38104 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 08/22/1989
3a. Date of Last Report: 03/21/1994

2. Principal Place of Business	2a. Mailing Address
21 777 S. FLAGLER PHILLIPS PTE	26 777 S. FLAGLER PHILLIPS PTE.
Suite, Apt. #, etc. 22 E. TOWER SUITE 909	Suite, Apt. #, etc. 27 E. TOWER SUITE 909
City & State 23 WEST PALM BEACH, FL	City & State 28 WEST PALM BEACH, FL
Zip 24 33401	Country 25
Zip 29 33401	Country 30

4. FEI Number: 62-0840246 ☐ 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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD	1.1 TITLE	☒ Change ☐ Addition
NAME	COHEN, STEPHEN R.	1.2 NAME	DELETE
STREET ADDRESS	777 S FLAGLER PHILLIPS PT E TOWER STE 909	1.3 STREET ADDRESS	
CITY-ST-ZIP	W PALM BCH. FL	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	☒ Change ☐ Addition
NAME	SHARP, J. GARY	2.2 NAME	
STREET ADDRESS	2158 UNION AVE.	2.3 STREET ADDRESS	777 S. FLAGLER PHILLIPS PTE. E. TOWER STE. 909
CITY-ST-ZIP	MEMPHIS TN	2.4 CITY-ST-ZIP	W. PALM BEACH, FL 33401
TITLE	VCF	3.1 TITLE	☒ Change ☐ Addition
NAME	BURFORD, FRED W.	3.2 NAME	
STREET ADDRESS	2158 UNION AVE.	3.3 STREET ADDRESS	777 S. FLAGLER PHILLIPS PTE. E. TOWER SUITE 909
CITY-ST-ZIP	MEMPHIS TN	3.4 CITY-ST-ZIP	W. PALM BEACH, FL 33401
TITLE	V	4.1 TITLE	☒ Change ☐ Addition
NAME	BORTH, GARY W.	4.2 NAME	
STREET ADDRESS	2158 UNION AVE.	4.3 STREET ADDRESS	777 S. FLAGLER PHILLIPS PTE. E. TOWER STE 909
CITY-ST-ZIP	MEMPHIS TN	4.4 CITY-ST-ZIP	W. PALM BEACH, FL 33401
TITLE	VCS	5.1 TITLE	☒ Change ☐ Addition
NAME	KENNEDY, ROBERT A	5.2 NAME	
STREET ADDRESS	777 S FLAGLER PHILLIPS PTE E TOWER STE 909	5.3 STREET ADDRESS	
CITY-ST-ZIP	W. PALM BCH. FL	5.4 CITY-ST-ZIP	33401
TITLE	V	6.1 TITLE	☒ Change ☐ Addition
NAME	LONG, HANEY	6.2 NAME	
STREET ADDRESS	2158 UNION AVE.	6.3 STREET ADDRESS	777 S. FLAGLER PHILLIPS PTE. E. TOWER STE 909
CITY-ST-ZIP	MEMPHIS TN	6.4 CITY-ST-ZIP	W. PALM BEACH, FL 33401

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: _____ FREDERICK W. BURFORD 2/23/95 901-725-6400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Title — Daytime Phone #

0476012 FP