

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jul 08 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **P33372** (4)
1. Corporation Name
EATERIES, INC.

Principal Place of Business
**3240 W. BRITTON ROAD, SUITE 202
OKLAHOMA CITY OK 73120-2032**

Mailing Address
**3240 W. BRITTON ROAD, SUITE 202
OKLAHOMA CITY OK 73120-2032**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/19/1991	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 73-1230348	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	Vice President
NAME	ORZA, VINCENT D., JR.	1.2 NAME	Norma Karker
STREET ADDRESS	3240 W., BRITTON RD.#202	1.3 STREET ADDRESS	1108 Woodbridge Rd.
CITY-ST-ZIP	OKLAHOMA CITY OK 73120	1.4 CITY-ST-ZIP	OKLAHOMA CITY, OK 73162
TITLE	V	2.1 TITLE	Director
NAME	BURKE, JAMES M.	2.2 NAME	Philip Friedman
STREET ADDRESS	3240 W., BRITTON RD.#202	2.3 STREET ADDRESS	9474 Deramus Farm Ct.
CITY-ST-ZIP	OKLAHOMA CITY OK 73120	2.4 CITY-ST-ZIP	Vienna, VA. 22182
TITLE	VT	3.1 TITLE	Director
NAME	QABLE, COREY	3.2 NAME	Larry Kordisch
STREET ADDRESS	3240 W. BRITTON RD. #202	3.3 STREET ADDRESS	11324 Shady Glen Rd.
CITY-ST-ZIP	OKLAHOMA CITY OK 73120	3.4 CITY-ST-ZIP	OKLAHOMA CITY, OK 73162
TITLE	S	4.1 TITLE	
NAME	ORZA, PATRICIA L.	4.2 NAME	
STREET ADDRESS	1901 MISTLETOE LANE	4.3 STREET ADDRESS	
CITY-ST-ZIP	OKC OK 73013	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	
NAME	ORZA, EDWARD	5.2 NAME	
STREET ADDRESS	1147-455 LEGGETT AVE.	5.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	
NAME	GOLDEN, THOMAS F.	6.2 NAME	
STREET ADDRESS	4181 S OAK RD	6.3 STREET ADDRESS	
CITY-ST-ZIP	TULSA OK	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.

SIGNATURE _____

CR2E034 (10/97)