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

PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 08, 1999 8:00 am
Secretary of State
06-08-1999 90010 014 ***550.00

DOCUMENT # **P33372**

1. Corporation Name
EATERIES, INC.

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

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 03/19/1991

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

4. FEI Number: 73-1230348 ☐ Applied For ☐ Not Applicable

5. Certifcate 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 owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 _____ 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	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	ORZA, VINCENT D., JR.		1.2 NAME		
STREET ADDRESS	3240 W., BRITTON RD.#202		1.3 STREET ADDRESS		
CITY-ST-ZIP	OKLAHOMA CITY OK 73120		1.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BURKE, JAMES M.		2.2 NAME		
STREET ADDRESS	3240 W., BRITTON RD.#202		2.3 STREET ADDRESS		
CITY-ST-ZIP	OKLAHOMA CITY OK 73120		2.4 CITY-ST-ZIP		
TITLE	VT	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	GABLE, COREY		3.2 NAME		
STREET ADDRESS	3240 W. BRITTON RD. #202		3.3 STREET ADDRESS		
CITY-ST-ZIP	OKLAHOMA CITY OK 73120		3.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
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	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
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	VP Marketing	
TITLE	V	☒ DELETE	6.1 TITLE		☐ Change ☒ Addition
NAME	KARTER, NORMA		6.2 NAME	Marc Buehler	
STREET ADDRESS	11108 WOODBRIDGE RD		6.3 STREET ADDRESS	912 Fox Hill Dr.	
CITY-ST-ZIP	OKLAHOMA CITY OK 73162		6.4 CITY-ST-ZIP	Edmond OK 73034	

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: _____ 5-17-99
SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (11/98)