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

Mailing Address

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

NONE

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500 SOUTH 3RD ST CHITC POI

JACKSONVILLE BCH FL 32250

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

JACKSONVILLE BCH FL 32250

2. Principal Place of Business

500 SOUTH 3RD ST

Suite, Apt. #, etc.

NONE

City & State

Zip

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24



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P92000013810 (6) DOCUMENT #
1. Corporation Name

A & S BURGER SYSTEMS, INC.

Country

9, Name and Address of Current Registered Agent

25

JACKSONVILLE BCH FL 32250

DARABI, FARZIN

SUITE 201

500 SOUTH 3RD ST

FILED Mar 04 1998 8:00am Secretary of State

	DO NOT WRITE IN THIS SPACE		
	 Date Incorporated or Qualified 12/23/1992 		
	4. FEI Number		Applied For
	59-3170594		Not Applicable
	5. Certificate of Status Desired] ;	\$8.75 Additional Fee Required
	Election Campaign Financing Trust Fund Contribution]	\$5.00 May Be Added to Fees
	 This corporation owes or has paid the Personal Property Tax due June 30 	_	t year Intandible Yes No
	10. Name and Address of New Regis	tered Age	ent
Name			
Street Addres	s (P.O. Box Number is Not Acceptable)		

A PROTESSA DE TRACADA CARA CONTRA ROLLA CONTRA CONT

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PD DELETE TITLE 1.1 TITLE ☐ Change Addition DARABI, FARZIN NAME 1.2 NAME 159 ELEVENTH ST. STREET ADDRESS 1.3 STREET ADDRESS ATLANTIC BCH. FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition DAHABI, FRANK 22 NAME 730 N. WALDO ROAD STREET ADDRESS 2.3 STREET ADDRESS GAINESVILLE FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP ■ DELETE STD TITLE 3.1 TITLE Change Addition PARTOW, RAMIN NAME 3.2 NAME 335 ELEVENTH ST. STREET ADDRESS 3.3 STREET ADDRESS atlantic beach fl CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE TITLE 4.1 TITLE ☐ Change ☐ Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

Country

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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.

City

30

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 anadoment with an address.

Zip Code