

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Aug 19 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 # P93000039116 (7)

1. Corporation Name
 ROADHOUSE GRILL NORTH MIAMI, INC.



Principal Place of Business
 6600 N. ANDREWS AVENUE, SUITE #160
 FT. LAUDERDALE FL 33309

Mailing Address
 6600 N. ANDREWS AVENUE, SUITE #160
 FT. LAUDERDALE FL 33309

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	06/02/1993	
22	City & State	27	City & State	4. FEI Number	
23	Zip	28	Zip	65-0419160	
24	Country	29	Country	Applied For	
		30		Not Applicable	
				5. Certificate of Status Desired	
				<input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing	
				<input type="checkbox"/> \$5.00 May Be Added to Fees	
				7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
X DEPIETRO, DEBRA A 6600 NORTH ANDREWS AVENUE, SUITE 160 FT. LAUDERDALE FL 33309				81 Name Christine Saffran			
				82 Street Address (P.O. Box Number is Not Acceptable) 6600 N. Andrews Ave., Suite 160			
				83			
				84 City Ft. Lauderdale FL 85 Zip Code 33309			

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, 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: *Christine Saffran* DATE: 8-6-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PV	1.1 TITLE	CFO
NAME	TOOLE, J. DAVID IIIKKK	1.2 NAME	Dennis Jones
STREET ADDRESS	6600 N. ANDREWS AVENUE, SUITE #160	1.3 STREET ADDRESS	6600 N. Andrews Ave, Suite 160
CITY-ST-ZIP	FT. LAUDERDALE FL 33309	1.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33309
TITLE	S	2.1 TITLE	CEO
NAME	BARNETT, CHARLES D	2.2 NAME	Ayman Sabi
STREET ADDRESS	899 W. CYPRESS CREEK ROAD., SUITE 500	2.3 STREET ADDRESS	6600 N. Andrews Ave. Suite 160
CITY-ST-ZIP	FT. LAUDERDALE FL 33309	2.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33309
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: *Christine Saffran* DATE: 8/6/98 (954) 489-9699

CR2E034 (5/98)