

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Morman Secretary of State DIVISION OF CORPORATIONS
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APPROVED
AND
FILED

95 MAR -7 AM 11:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000046094 (7)

1. Corporation Name

MPI FOOD COURTS, INC.

Principal Place of Business

5475 FACTORY SHOPS BLVD.
ELLENTON FL 34222

Mailing Address

5808 BALCONES DR.
STE 105
AUSTIN TX 78731
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 06/23/1993	3a. Date of Last Report 05/01/1994
4. FBI Number 65-0421469	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	

2. Principal Place of Business	2a. Mailing Address
21 250 E. Palm Dr.	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 Florida City, FL	27
City & State	City & State
23 33034	28
Zip	Zip
Country	Country
24 DADE	30

9. Name and Address of Current Registered Agent

KAHN, MIKE
5475 FACTORY SHOPS BLVD.
ELLENTON FL 34222

10. Name and Address of New Registered Agent

81 Name MARTIN GORDON
82 Street Address (P.O. Box Number is Not Acceptable) 250 E. PALM DR
83
84 City FLORIDA CITY FL
85 Zip Code 33034

11. Pursuant to the provisions of Sections 607.002 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

Martin Gordon (MARTIN L. GORDON)

2/22/95

(Signature, typed or printed name of registered agent and title of applicant)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	MUZZY, JOHN
STREET ADDRESS	6505 HALSEY COURT
CITY - ST - ZIP	AUSTIN TX 78739
TITLE	PD
NAME	GRIFFIN, PAUL H
STREET ADDRESS	4015 S. IH-35, SUITE 320
CITY - ST - ZIP	SAN MARCOS TX 78666
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	LINDA MUZZY
2.3 STREET ADDRESS	6505 HALSEY COURT
2.4 CITY - ST - ZIP	AUSTIN TX 78739
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 of this report or on an attachment with an address.

SIGNATURE:

John Muzzy John Muzzy

2/22/95 512-419-9015