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

PROFIT CORPORATION ANNUAL REPORT

1999

THE POINT STEAKHOUSE, INC.



DOCUMENT # **P93000060895**1. Corporation Name

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90109 048 ***150.00

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			BELLE STATE AND A	ARTES (8118 1818)	
		1939 183 1 93			
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1			MONTH MATERIAL STATES		111111111
			## ##################################		

										
Principal Place of Business Mailing Address							3	-	• •	
2300 GLADES ROAD 2300 GLADES ROAD										
415 EAST TOW BOCA RATON			415 EAST TOWER BOCA RATON FL 33431			DO NOT WRITE IN THIS SPACE				
US US							3. Date Incorporated or Qualifed]
							08/31/1993			
2. Principal P	lace of Business	2a. Mail	ing Address	-			4. FEI Number			Applied For
21		26		, ;		. 	65-0431628			fot Applicable
Suite, Apt.	#, etc.	├ ──	Suite, Apt. #, etc.				5. Certifcate of Status Desired			Additional
22 27 27 27 27 27 27 27 27 27 27 27 27 2				State			- 		Fee Required	
City & Stat	e	<u> </u>	City & State			6. Election Campaign Financing Trust Fund Contribution			May Be to Fees	
Zip	Country			Col	intry	 				10 rees
–	25)	├ ── `		30	,,,,,		 This corporation owes the curr Personal Property Tax. 	ent year in	Yes	™ No
24∫	9. Name and Address of Cur	29 rent Registered	Agent	(30)	Τ		10. Name and Address of New I	Registered		
	3. Hamo and Address of Car	Torre viagrature			81	Name				
TUB	BS, STEVEN R				اجرا					
	GLADES ROAD Y				82	Street Add	ddress (P.O. Box Number is Not Acceptable)			
	EAST TOWER				83			-		
BOC	CA RATON FL 33431				84	City			85 Zig	Code
							poration submits this statement for the	`FL	-	į.
SIGNATURE	Signature, typed or printed name of registered				l Ageni	t signature requir	rad when reinstating)	DATE		
12.		AND DIRECTO		13.			ADDITIONS/CHANGES TO OF	FICERS A		
TITLE	PSD		☐ DELETE	1,1 TI					Change	• Addition
NAME	1999-1997-1997-1997-1997-1997-1997-1997		1.2 N				•			
STREET ADDRESS 2300 GLADES RD., STE. 415 EA		5 EAST TOWE				ADDRESS				
CITY-ST-ZIP	BOCA RATON FL 33431		Contract		TY-ST	r-zip			☐ Change	Addition
TITLE			☐ DELETE	2.1 17		{			Cl cuange	, C Addition
NAME				2.2 N						Ì
STREET ADDRESS						ADDRESS	.			
CITY-ST-ZIP			DELETE	2.4 C	TY-S	T- ZIP			- Change	Addition
TITLE NAME			C) OLLLIE	3.2 N			٠,			
STREET ADDRESS						ADDRESS				J
CITY-ST-ZIP					TY-S		•			1
TITLE			DELETE	4.1 TJ		-			☐ Change	Addition
NAME				4. 2 N	AME					
STREET ADDRESS				1		ADDRESS				
CITY-ST-ZIP					TY-ST					ļ
TITLE			☐ DELETE	5.1 TS					☐ Change	Addition
NAME				5.2 N	AME		<u>.</u>			
STREET ADDRESS				5.3 S	TREET	ADDRESS				}
CITY-ST-ZIP				5.4 C	TY-ST	r-ziP				
TITLE			DELETE	6.1 TI	TLE				Change	Addition
NAME				6.2 N	AME					{
STREET ADDRESS				6.3 S	TREET	ADDRESS	•			

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.

6.4 CfTY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED MANE OF STANING OFFICER OF PIRECTOR

2/11/99 56(-36(-0330)

CR2E034