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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morfitt  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P93000063827 (8)

1. Corporation Name

STOUTS JEWELL RESTAURANT, INC.



Principal Place of Business

Mailing Address

8349 OVERSEAS HWY  
MARATHON FL 33050  
US

8349 OVERSEAS HWY  
MARATHON FL 33050  
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

28 Zip

Country

Country

9. Name and Address of Current Registered Agent

GREENMAN, FRANKLIN D P.A.  
5800 OVERSEAS HIGHWAY  
SUITE 40  
MARATHON FL 33050

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 607.05(2) and 607.15(6), 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 607.05(2), Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS

|                |                        |            |
|----------------|------------------------|------------|
| TITLE          | D                      | [ ] DELETE |
| NAME           | CURRY, RICHARD         |            |
| STREET ADDRESS | 535 80TH STREET, OCEAN |            |
| CITY, ST, ZIP  | MARATHON FL 33050      |            |
| TITLE          | D                      | [ ] DELETE |
| NAME           | CURRY, SUSAN J         |            |
| STREET ADDRESS | 535 80TH STREET, OCEAN |            |
| CITY, ST, ZIP  | MARATHON FL 33050      |            |
| TITLE          |                        | [ ] DELETE |
| NAME           |                        |            |
| STREET ADDRESS |                        |            |
| CITY, ST, ZIP  |                        |            |
| TITLE          |                        | [ ] DELETE |
| NAME           |                        |            |
| STREET ADDRESS |                        |            |
| CITY, ST, ZIP  |                        |            |
| TITLE          |                        | [ ] DELETE |
| NAME           |                        |            |
| STREET ADDRESS |                        |            |
| CITY, ST, ZIP  |                        |            |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                   |                         |
|-------------------|-------------------------|
| 11 TITLE          | [ ] Change [ ] Addition |
| 12 NAME           |                         |
| 13 STREET ADDRESS |                         |
| 14 CITY, ST, ZIP  |                         |
| 21 TITLE          | [ ] Change [ ] Addition |
| 22 NAME           |                         |
| 23 STREET ADDRESS |                         |
| 24 CITY, ST, ZIP  |                         |
| 31 TITLE          | [ ] Change [ ] Addition |
| 32 NAME           |                         |
| 33 STREET ADDRESS |                         |
| 34 CITY, ST, ZIP  |                         |
| 41 TITLE          | [ ] Change [ ] Addition |
| 42 NAME           |                         |
| 43 STREET ADDRESS |                         |
| 44 CITY, ST, ZIP  |                         |
| 51 TITLE          | [ ] Change [ ] Addition |
| 52 NAME           |                         |
| 53 STREET ADDRESS |                         |
| 54 CITY, ST, ZIP  |                         |
| 61 TITLE          | [ ] Change [ ] Addition |
| 62 NAME           |                         |
| 63 STREET ADDRESS |                         |
| 64 CITY, ST, ZIP  |                         |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 registered or true and accurate employee 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 addition.

SIGNATURE: *Susan J. Curry* *Susan J. Curry* 2/1/96 305-743-6437  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)