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FILED
Apr 08 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P93000065269 (1)

1. Corporation Name
SOUTHERN GRILLES, INC.

Principal Place of Business

Mailing Address

1415 TIMBERLANE RD
STE 215
TALLAHASSEE FL 32312
US

1415 TIMBERLANE RD
215
TALLAHASSEE FL 32312-1730
US



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

09/17/1993

3a. Date of Last Report

02/16/1996

4. FEI Number

59-3202434

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

10. Name and Address of New Registered Agent

JOHANSEN, PREBEN
1415 TIMBERLANE RD
215
TALLAHASSEE FL 32312

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 607.0502 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
DPST	JOHANSEN, PREBEN	1415 TIMBERLANE RD., SUITE 215	TALLAHASSEE FL	
VP	JOHANSEN, PREBEN	1415 TIMBERLANE RD, SUITE 215	TALLAHASSEE FL	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-ST-ZIP	
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY-ST-ZIP	
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY-ST-ZIP	
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY-ST-ZIP	
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY-ST-ZIP	
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY-ST-ZIP	

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

1-14-97

CR2E034 (9/96)