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

PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT #
1. Corporation Name P93000079133 (3) R & D RESTAURANTS, INC. Principal Place of Business Mailing Address 3325 W. UNIVERSITY AVE. 4518 SW 97TH TERR. GAINESVILLE FL \$2607 GAINESVILLE FL 32808 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>11/10/1993</u> 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 26 59-3211310 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 26 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible Yes □ No 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name TYNDALL, RALPH 4518 SW 97TH TERRACE 82 Street Address (P.O. Box Number is Not Acceptable) **GAINESVILLE FL 32608** В3 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 bottle 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 faithful and argent the obligations of, Section 607.0505, Florida Statutes. 125 BY lol en reinstation) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TITLE Đ 1.1 TITLE \_\_\_ Addition NAME TYNDALL, RALPH P. 1.2 NAME 4518 SW 97TH TERRACE STREET ADDRESS 1.3 STREET ADDRESS **GAINESVILLE FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE HARVEY, DANNEL M JR NAME 2.2 NAME 3121 FOURTH STREET NORTH STREET ADDRESS 2.3 STREET ADDRESS **ST PETERSBURG FL 33704** CITY-ST-ZIP 2.4 CITY - ST - ZIP □ DELETE 3.1 TITLE Change ■ Addition TITLE NAME 3.2 NAME STREET ADDRESS 33 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - 7IP DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby 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 facciver 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.

6.4 CITY-ST-ZIP

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257-276-5699

**FILED** 

Jan 21 1998 8:00am

Secretary of State