FILE NOW: FILING E AFTER MAY 197 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Jul 09 1998 8:00am Secretary of State

DOCUMENT #
1. Corporation Name

FLAMINIA'S FAMOUS P94000018160

FLAMINIA'S TALDAN KITCHEN

Principal Plac	e of Business	Mailing Address	<u> </u>	10.00
221	S 5 AIA			Amendment
_				DO NOT WRITE IN THIS SPACE
Coci	A, BBACH, FO	32931		3. Date Incorporated or Qualified APCI 1, 199 B
Principal P	lace of Business	la beneral a company	4.4	4. FEI Number 3229182 Applied For
21 FL1	9m/N1195	26 32 0 5 / Suite, Apt. #, etc.	7 117	C Track Applicable
SUITE , Apt.	#, e lc.			5. Certificate of Status Desired
City & State		City & State		6. Election Campaign Financing \$5,00 May Be
23 COC	ON BEACH, FL	28		Trust Fund Contribution Added to Fees
	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 379	3 25 U. S. A 8. Name and Address of Curre	29 3	0	Personal Property Tax due June 30. Yes No
			81 Name	10. Name and Address of New Registered Agent
Jul	NS LTONYA	BRAW ()		JULIUS & TONYA BRAND
80)	QUEENS LAN) AUF	82 Street	Address (P.O. Box Number is Not Acceptable) OVUTHING LATIV I) HULT
11/5	ERIT FSLIAND,	FL 32953	83	DERRITT -ISLAND, FL
11/2			84 City	FL 85 Zip Code Z
11. Pursuant t	o the provisions of Sections 607.050	02 and 607.1508, Florida Statutes.	the above-named	corporation submits this statement for the purpose of changing its registered
office or re agent. Lar	egistered agent, or both, in the State or B niliar with, and accept the oblig	of Florida. Such change was aut ations of Section 607.0505, Florig	horized by the corp ta Statutes	poration's board of directors. I hereby accept the appointment as registered
SIGNATURE		JULIUS BRATA)		TONYA BEAMS 5/6/98
	Sign fore, typed or punied name of registered ag	ent and title if applicable (NOTE F		e roquired when reinstatings (DAT).
12.	OFFICERS AN	ID DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PRESIDENT + TREAMER Change DAddition
TITLE	resident	•	1.2 NAME	The street of th
NAME STREET ADDRESS	Paul Warren	P	1.3 STREET ADDRESS	JULIUS BRAND
CITY-ST-ZIP	•		1.3 STREET ADDRESS	80 QUEENSLAND AVE MERRITE ESCAND FL 32953 VIKE PRESIDENT + SECRETARY Change Addition
TITLE		DELETE	2.1 TITLE	Maria ORIGINAL TO A CITAL STRUM Change Addition
NAME		-	2.2 NAME	TOURS BOAND
STREET ADDRESS			2.3 STREET ADDRESS	SO DUCCALLOND AUF
CITY-ST-ZIP		'	2 4 City-ST-ZIP	TONTA BRAND AVE SUGGENSLAND AVE 32953
THLE		DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3 3 STREFT ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	<u> </u>
TITLE		DELETE	4 1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY - ST - ZIP			4.4 CITY-ST-ZIP	<u> </u>
TITLE		☐ DELETE	5 1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	200002585542
STREET ADDRESS			5.3 STREET ADDRESS	-07/10/9801082012
CITY-ST-ZIP			5 4 CITY-ST-ZIP	***61.25
TITLE		☐ DELĒTE	6.1 TITLE	Change Addition
NAME			6.2 NAMě	\\ \a\\
STREET ADORESS			6.3 STREET ADDRESS) ' ^~\
CITY - ST - 7IP			64 CITY-ST-7IP	· · •

14. Thereby certify that the information supplied with this fitting 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 13 if changed, or on an attachment with an address.

SIGNATURE:

SULIUS BEAW)

BIGNATURE AND TYPED OR PRINTED NAME OF

NAME OF SIGNING OFFICER OR DIRECTOR

16/98 40

407 0459 Daytime Phone # 72E034 (10/97)