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

PROFIT. CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9400026676 (4) FRANCHISE DEVELOPMENT CORP.

**FILED** May 06 1997 8:00am Secretary of State



Principal Plac	o of Ducinosa	Mailing Address 201 S BISCAYNE BLVD			I IDDIADU AND INTINITIEN CENT DONN DENK DUNG ANDRE BRAD DANK NEDID BAN 1884		
201 8 BISCAY							
8TE 2950	ME DEAD	STE 2950					
MIAMI FL 8313	n	MIAMI FL 33131-4330					
US		US			3. Date Incorporated or Qualified 04/04/1994	3a. Date of Last Re 06/27/1996	port
	Place of Business	2a. Mailing Address			4. FEI Number		
21		26			65-0485693	Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Ac	
22		27]				Fee Req	<u>'</u>
City & Stat	e	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
<b>23</b> Zip	Country	<b>28</b> ]	Cour		Trust Fund Contribution		
24	25	}	1	шу	8. This corporation has liability for i	ntangible tax under s. 1 ] Yes = □ No	199.032,
[24]	9. Name and Address of Current		30		10. Name and Address of New Re		
RRC	ONSON, STEVEN N			B1 Name		giotorou rigorii	
	S BISCAYNE BLVD, ST 2950			The second of th			
	1500	. 82 Street Add		Address (P.O. Box Number is Not Acceptab	le)		
MIAMI FL 33131		83					
17197	MI 1 E 00 10 1						
			1	B4 City		EL 85 Zip Ci	ode
11 Pursuant	to the provisions of Sections 607.0502	and 607 1508. Llorida Statulo	s the ab	ove-name	d corporation submits this statement for the p	urnose of changing its	togistored
l office or a	registered agent, or both, in the State c am familiar with, and accept the obligat	d Florida. Such change was a	uthorized	by the co	rporation's board of directors. I hereby accep	t the appointment as re	ogistered
SIGNATURE	Book and the second of the second of				re required when reinstating)		<del></del>
12.	Signature, typed or printed name of registered agent OFFICERS AND		13.	Agent signatu	ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTORS	11112
TITLE	PD	DELETE	1,1101	F		<b></b>	Addition
NAME	BRONSON, STEVEN	1.2 N			President, Director, S	LL onange	
STREET ADDRESS	201 S BISCAYNE BLVD, STE 29	150		EFT ADDRESS	BRONSON, STEVEN N.	- 4 - 0000	
CHTY-ST-ZIP	MIAMI FL			Y - ST - ZIP	Lot 3. Discayile bivo.		
TITLE		DILLETE	2.4 101		Miami, FL 33131	Change	Addition
NAME			2.2 NA				
STREET ADDRESS		2.8 STHELL ADDRESS					
CITY-ST-ZIP			2. 4 CITY - ST - ZIP				
TITLE		DELETE 3.17				Change	Addition
NAME			3.2 NAME				
STREET ADDRESS				EFT ADDRESS			
CITY-ST-ZIP				Y - \$1 - ZIP			
TITLE		DELETE	4.4 1111			Change	Addition
NAME	1		4. 2 NA	M{			
STREET ADDRESS			4.8 STP	EET ADORESS			
CITY-ST-ZIP			9	Y - \$1 - ZIP	·		
TITLE		☐ DETELE	5.1 TILE			Change	Addition
NAME			5.2 NA/	ME			
STREET ADDRESS			5.B \$1F	EET ADDRESS	.		
CITY-ST-ZIP				Y - S1 - 7IP			
TITLE	the contract of the contract o		6.1 7111			Change	Addition
NAME			6 2 NA			-	
STREET ADDRESS				::- :EE1 ADDRESS			
CITY-ST-ZIP				Y - \$1 - ZIP			
44 (42 522	har a said that the said to the		<b>, .</b>		140 07(0)(0) 50 14 00 14		

I do nereby 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 supplied ental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the contractor or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 chapted, go on an attachment with an address.