

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 27, 2005 8:00 am**  
**Secretary of State**

04-27-2005 90347 015 \*\*\*150.00

DOCUMENT # P94000031653

1. Entity Name

RESTAURANT REAL ESTATE MANAGEMENT CORPORATION



Principal Place of Business

1601 BELVEDERE RD SUITE 407 SOUTH  
WEST PALM BEACH FL 33406

Mailing Address

1601 BELVEDERE RD SUITE 407 SOUTH  
WEST PALM BEACH FL 33406

RECEIVED



1st MOORE

CR2E034 (10/04)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0486285

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

GERSON, GARY N  
1645 PALM BEACH LAKES BLVD  
SUITE 1200  
WEST PALM BEACH FL 33401

7. Name and Address of New Registered Agent

Name

Paul Mapes

Street Address (P.O. Box Number is Not Acceptable)

1601 BELVEDERE ROAD

Suite 407 South

City

West Palm Beach

FL

Zip Code

33406

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/19/05

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE EVP ☐ Delete  
NAME METZ, JOHN L.  
STREET ADDRESS 8008 SOUTH FLAGLER COURT  
CITY-ST-ZIP W. PALM BEACH FL

TITLE CDS ☐ Delete  
NAME MEYER, ARTHUR  
STREET ADDRESS 1601 BELVEDERE ROAD, #407, S  
CITY-ST-ZIP WEST PALM BEACH FL

TITLE D ☐ Delete  
NAME ASARCH, GAIL  
STREET ADDRESS 1601 BELVEDERE ROAD #407 S  
CITY-ST-ZIP WEST PALM BEACH FL

TITLE T ☐ Delete  
NAME MAPES, PAUL  
STREET ADDRESS 1601 BELVEDERE ROAD SUITE 407 SOUTH  
CITY-ST-ZIP WEST PALM BEACH FL

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President, Director ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE Secretary, Director ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE Director ☐ Change ☒ Addition  
NAME SUELE MEYER  
STREET ADDRESS 1601 BELVEDERE Rd., Ste 407 South  
CITY-ST-ZIP West Palm Beach, FL 33406

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/05

Date

(561) 689-6601

Daytime Phone #