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AMENDED

PROFIT CORPORATION ANNUAL REPORT 1997

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

FILED
97 NOV 26 PM 12:02
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P94000031661

1. Corporation Name

NATIONAL FRANCHISE REALTY GROUP, INC.

Principal Place of Business — Mailing Address

621 N.W. 53rd Street
#450
Boca Raton, FL 33487

3. Date Incorporated or Qualified: 04/22/94	3a. Date of Last Report
4. FEI Number: 65-0486879	☐ 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	

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) / Country (25)	Zip (29) / Country (30)

9. Name and Address of Current Registered Agent

Neesa B. Warlen
621 N.W. 53rd Street; #450
Boca Raton, FL 33487

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

500002362115--9
-12/03/97--01069--002
******60.00 ******60.25

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

TITLE	SD	☒ DELETE
NAME	Weissman, Michael	
STREET ADDRESS	621 N.W. 53rd Street #450	
CITY-ST-ZIP	~~Boca Raton, FL 33487~~	
TITLE	PTD	☐ DELETE
NAME	Weissman, Richard S.	
STREET ADDRESS	621 N.W. 53rd Street #450	
CITY-ST-ZIP	~~Boc Raton, FL 33487~~	
TITLE		☐ DELETE
NAME	VD	
STREET ADDRESS	Gent, William	
CITY-ST-ZIP	~~621 N.W. 53rd Street #450~~	
TITLE	Boca Raton, FL 33487	☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME	500002362115--9	
1.3 STREET ADDRESS	-12/03/97--01069--003	
1.4 CITY-ST-ZIP	******1.00 ******1.00	
2.1 TITLE	PTSD	☐ Change ☒ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (9/96)

14. I do hereby certify that the information [illegible] Section [illegible] Florida Statutes. [illegible] 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] 10/29/97 (561) 994-6226

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #