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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000038062 (3)

FILED May 11 1998 8:00am Secretary of State

1	orporation Nam PUNJAB RE	estaurant I, Inc.									
Princ	ipal Place of Bu	usiness	Mailing .	Address				13 0 0111 00100 (11		il e e tti e şj	Q1 10Q1
5975 NORTH FEDERAL HIGHWAY 5975 NORTH FEDERAL HIGHWAY FORT LAUDERDALE FL 33308 FORT LAUDERDALE FL 33308						DO NOT WRITE IN THIS SPACE					
							3. Date Incorporated or Qualific		SPACE		
							05/20/1994	au .			
2. Pr	rincipal Place of	f Business	2a. Maili	ng Address			4. FEI Number			Applie	d For
21	·		26				65 <u>-0</u> 502401			Not A	pplicable
22 22	Suite, Apt. #, etc.		Suite, Apt #, etc.			5. Certificate of Status Desired			75 Addi e Requi		
-	ity & State		City	& State			6. Election Campaign Financin	9	\$ 5.	00 Ma	y Be
23			28		·		Trust Fund Contribution			ded to F	
ر zi	ip	Country	Zip		Count	ry	8. This corporation owes or has				
24		25 Name and Address of Current	29 Pagistered	Anont	30		Personal Property Tax due J		Yes	ЦΝ	0
		V, JEFFREY M	Liefistered	Want	8	1 Name	10. Name and Address of New	negistereo	wgent		
		V, JECCHET M HALLANDALE BEACH BLVD	1								
		DALE FL 33009	74		8	2 Street Ad	dress (P.O. Box Number is Not Acce	otable)			
	1 INDUMIN	PER 1 F 00000			6:	3				——	
					_						
					8-	4 City		FL	85	Zip Cod	e
11.	Pursuant to the	provisions of Sections 607,0502	and 607.150	08, Florida Statu	ites, the abo	ve-named c	orporation submits this statement for the	ne purpose o	f changi	ng its re	gistered
11.	Pursuant to the poffice or register	provisions of Sections 607.0502 ared agent, or both, in the State of uliar with, and accept the obligat	and 607.150 of Florida, Su tions of, Sect	08, Florida Statu ich change was tion 607.0505. F	ites, the abo authorized b lorida Statut	l ive-named c by the corpo es	orporation submits this statement for the ration's board of directors. I hereby ac	ne purpose o coept the app	f changi cointmen	ng its re t as reg	gistered istered
	•	provisions of Sections 607,0502 fred agent, or both, in the State c illiar with, and accept the obligat	and 607.150 of Florida, Su tions of, Sect	08, Florida Statu uch change was tion 607.0505, F	ites, the abo authorized b lorida Statuti	ve-named c by the corpo es.	orporation submits this statement for t ration's board of directors. I hereby a	ne purpose o ccept the app	of changi cointmen	ng its re it as reg	gistered istered
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SIGN 12.	IATURE		il and title if applic	rable (NO	TE: Registered A	igent signature re		DATE	D DIREC	TORS IN	N 12
SIGN 12. TITLE	IATURE Signatur	re, typed or peritied name of registered agent OFFICERS AND	il and title il applic	able (NO	11E: Registered A 13.	gent signature re	cured when reinstating)	DATE		TORS IN	
SIGN 12. TITLE NAME	NATURE Signahar	re, typed or printed name of registered agent OF LICETIS AND NGH, RAMJIT	il and title il applic	rable (NO	13. 1.1 TITLE 1.2 NAME	gent signature re	cured when reinstating)	DATE	D DIREC	TORS IN	N 12
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•• Thereby certify that the information supplies with this litting does not quality for the exemption stated in Section 119.07(3)(), Florida Statutes. Turner certify that the information indicated on this arimual report or supplemental arimual 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 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.

CIGNIATURE.

Tokom Pour

TARCEM KAUR L

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