

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000038581 (2)

1. Corporation Name

INTERNATIONAL RESTAURANT SERVICES, CORP.



Principal Place of Business

3208 LAKE WASHINGTON RD
MELBOURNE FL 32935

Mailing Address

3208 LAKE WASHINGTON RD
MELBOURNE FL 32934
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

PINERO, ANTONIO
3208 LAKE WASHINGTON RD
MELBOURNE FL 32935

3. Date Incorporated or Qualified

05/19/1994

3a. Date of Last Report

02/20/1995

4. FEI Number

59-3247864

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

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

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 signatory, and date of signature. If the signatory is a corporation, the signatory must be an officer or director of the corporation. If the signatory is an individual, the signatory must be a resident of the State of Florida.

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME PINERO, ANTONIO
STREET ADDRESS 2854 SARAZEN CT
CITY-STATE-ZIP MELBOURNE FL ☐ DELETE

TITLE VP
NAME PINERO, ENCARNACION
STREET ADDRESS 2854 SARAZEN CT
CITY-STATE-ZIP MELBOURNE FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ DELETE

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

A. PINERO

4-16-96

253-1458

CR2E034 (12/95)