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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandre/B. Mortham

Scoretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P94000043959 (3)

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1997 AUG 25 AM 8: 58

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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Principal Plac	e of Business	Mailing Address							
5001	NW104 Ave.	5001 NW	104	900.					
	F1 33178-2219	Miami F	1 3217	8-101	9				
. manell		Mant P	, 5517	o organ	′	3. Date Incorporated or Qualified 6/13/1994		ate of Last F	
2. Principal P	lace of Business	2a. Mailing Address				4. FE! Number			oplied For
21		26				65-0495211			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
22]		City & State							equired
City & State	e	28 City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country	Zip	Coun	try		8. This corporation has liability for			
24	25	29 30				Florida Statutes			
	.9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Re	gistered	Agent	
Kou	UAISKI, Edwar	ed	ŀ	31 Name					
50	DI NIW INV AU	.	Į	32 Street A	Addres	s (P.O. Box Number is Not Accepta	ole)		
1.1	01 NW 104 AU AMI F1. 33178		Į.				_		
. 1011	AMI F1.301		'	33					
			1	34 City				85 Zip	Code
11 Puzeuant	to the provisions of Sections 607.050	2 and 607 1508 Florida Stat	utos the abi	nuc-pamed	corpor	otion submits this statement for the	FL	obanaina i	
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was	s authorized	by the corp	poration	's board of directors. I hereby acce	pt the app	ointment as	registered
SIGNATURE	Signature, lyped or printed name of registered ages	nt and title if applicable (Ni	OTE Registered	Anert s oratire	required	when reinstating)	DATE		
12.	OFFICERS AND		13,	9		ADDITIONS/CHANGES TO OFFI		DIRECTOR	RS IN 12
TITLE	P	DELETE	1.1 1(1)	E				Change	Addition
NAME	KOWAISKI, Edi	wand	1.2 NAN	AE		500002 -08/27	278	17,99	i-1
STREET ADDRESS	KOWALSKI Edi 5001 NW 104 Miami Fl 33	AUE	1.3 STR	EET ADDRESS		-U8/ <i>2</i> (79 (~~·	U11J84-	-UUZ
CITY-ST-ZIP	MIAMI FI. 33	178-2019		1 - ST - ZIP			<u> </u>		165.00
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NAME			2.2 NAM						
STREET ADDRESS				EET ADDRESS					
TITLE		DELETE	3 1 TUTL	Y - S1 - ZIP				☐ Change	Addition
and I			32 NAN	}	1				, nao.no.n
STRUCT ADDRESS			3.3 STRI	EET ADDRESS					
CITY-ST-ZIP			3.4 CIT	Y-ST-ZIP					
TITLE		DELETE	4 1 TITL	F			-	Change	☐ Addition
NAME			4 2 NAI	ME J					
STREET ADDRESS			4.3 STR	EET ADDRESS	•				
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TITLE		L_] DELETE	517171					☐ Change	
NAME CTREET ADODESC			5.2 NAM						
STREET ADDRESS City-St-Zip				EET ADDRESS					
TITLE		DELETE	5.4 CHY 61 IffL	'-ST-ZIP F			·	☐ Chano	Addition
NAME		_ :•	62 NAN					_ ,(c)	_b
STREET ADDRESS				EET ADDRESS				MAN	11Q
CITY-ST-ZIP			8.4 City	'-S1-7IP				O)	, -
14. I do hereb	by certify that the information supplied	with this filing does not qua	alify for the e	xemption st	ated in	Section 119.07(3)(i), Florida Statute	s. I further	certify that	the
l am an ol	n indicated on this annual report or si flicer or director of the corporation or n Block 12 or Block 13 if changed, or	the receiver or trustee empo	owered to ex	ecute this re	eport a	y signature shall have the same legs s required by Chapter 607 Florida S	ii errect as Statutes; ar	ii made un: nd that my r مصمیر	der oath; tha name



July 18, 1997

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, Fl 32314

To Whom It May Concern:

Please see our cancelled check # 2770 in the amount of \$165.00 which represents payment to you on January 13, 1997.

Please check your records and if you require any additional information, please feel free to call our offfice.

Sincerely,

Susan Friedland, Office Manager

Doral Park Restaurant Inc.

SF/

enc.

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