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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

FILED

May 20 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000048168 (6)

CONCORDE CUISINE CORPORATION

S943 DAVIE BLVD FT. LAUDERDAL FL 33312 US		DIPBOYE. MARK 6367 NW 20 ST MARGATE FL 33063-2314	6367 NW 20 ST MARGATE FL 33063-2314		
		US		3, Date Incorporated or Qualified 06/23/1994	3a. Date of Last Report 07/11/1996
2. Principal Place of Business		28. Mailing Address	+Λ Λ.	4. FEI Number	Applied For
21		26 614 NE 8	14x Avenu	<u>a 65-0503244</u>	Not Applicable
Suite, Apt. #, etc. 22		Suite, Apt. #, etc.	27		\$8.75 Additional Fee Required
City & State		City & State			\$5.00 May Be
23 Zip	Country	28 Fort Lauder	Country	Trust Fund Contribution	Added to Fees
24	— <u> </u>	29 33304 3	Browar	This corporation has liability for Florida Statutes	intangible tax under s. 199,032, Yes No
[24]	25 9. Name and Address of Cu		O Di Olcar	10. Name and Address of New Re	
NOROW MADY					
	7 NW 20 ST			DIPBOYE, MAI	
MARGATE FL 33065			B2 Street A	ddress (P.O. Box Number is Not Accepta	Nenue
]	10411E 1 E 00000		83	D	VEHVE
			ļ <u>.</u>		
			84 City	Fort Laurerdale	FL 85 Zip Code
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. Thereby accept the appointment as registered agent. Lam familia with, and an employed by the corporation board of directors. Thereby accept the appointment as registered agent. Lam familia with, and an employed by the corporation because of the appointment as registered agent.					
	and and appropriate	iningalions or, second 607.0305, Piori	ua siaiules.	۷۶	130/dz
SIGNATURE	Stignarize track appointed name of existen	ed and a demand applicable (NOTE	Registered Agent signature r	equired when reinstating)	DATE
12.		ANDTIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TULE		Change Addition
NAME	DIPBOYE, MARK		1.2 NAME	eť .	
STREET ADORESS	6367 NW 20TH ST		1.3 STREET ADDRESS	614 NE8th Ave Ft. Landerdale F	
GHY-S1-206	MARGATE FL		1.4 CITY-ST-ZIP	Ft Landerdalo F	33304
TITLE		DELETE	21 TITLE		Change Addition
NAME.	}		2.2 NAME		
STREET AODRESS			2.3 STREET ADDRESS		
CITY - ST - ZiP			2. 4 CITY-ST-ZIP	-	
THEF		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
City - St - ZiP			3.4. CITY-ST-ZIP		
11i LE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADORESS	,		4.3 STREET ADDRESS		
COLY - ST. ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	51 TITLE		Change Addition
NAME			52 NAME		
 STREET ADDRESS			53 STREET ADDRESS		
C(*Y - \$1 - 7)9			5.4 CITY-ST-ZIP		
1081		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
Cify-SI-ZIP			6.4 CITY-ST-ZIP		
14. I do here	by certify that the information sup	oplied with this filing does not qualify	for the exemption st	ated in Section 119.07(3)(i), Florida Statute	es. 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 arm 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					