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

Mailing Address

**PROFIT CORPORATION** ANNUAL REPORT

**1998** 

Principal Place of Business

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

Block 12 or Block 13 if changed, or on an attachment with an address

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

TITLE NAME



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P94000053336 (1)

CHEZ MAX OF LAKE WORTH, INC.

4828 LAKE WORTH ROAD 4828 LAKE WORTH ROAD **GREEN ACRES FL 33463 GREEN ACRES FL 33463** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>07/18/1994</u> 2. Principal Place of Business 2a. Mailing Address Applied For 65-0507446 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. See See No. Zip Country Zφ Country 24 Personal Property Tax due June 30. 25 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent VOGAL, MARK 1325 \$ CONGRESS AVE. ss (P.O. Box Number is Not Acceptable) 82 SUITE 232 83 BOYNTON BEACH FL 33426 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 of large was authorized by the corporation's board of directors of hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 07.0505, Florida Statutes. (NOT: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS Change \_\_\_ Addition DELETE 1.1 TITLE TITLE CAPOL ANNWARD
9468 SAMSH MUSS RD W.
LAKENWETH, PLOKIDA 33467 WARD: LAWRENCE 1.2 NAME NAME STREET ADDRESS **9468 SPANISH MOSS RD** 1.3 STREET ADDRESS LAKE WORTH FL 33467 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ☐ Addition 21 1ITLE TITLE NAME **IBRAHIM. MAHER** 2 2 NAME 127 N MILITARY STREET ADDRESS 2.3 STREET ADDRESS WEST PALM BEACH FL 33409 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition ☐ DELETE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3 4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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

Change

Change

Addition

Addition

**FILED** 

Apr 24 1998 8:00am

Secretary of State