

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

FILED  
Apr 23, 1999 8:00 am  
Secretary of State

04-23-1999 90050 044 \*\*\*150.00

03 70493

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000082670

1. Corporation Name  
CORAL SPRINGS RESTAURANT, INC.

Principal Place of Business  
10140 W SAMPLE RD  
CORAL SPRINGS FL 33056

Mailing Address  
P O BOX 1120  
BOCA RATON FL 33429  
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
11/07/1994

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For

21 Suite, Apt. #, etc.

26 SALS CORPORATE  
10026 SPANISH ISLES BLVD  
B16 & B17  
BOCA RATON, FL. 33498

65-0567399

Not Applicable

22 City & State

27 City & State  
BOCA RATON, FL. 33498

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 Zip Country

28 Zip Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24 Zip Country

29 Zip Country

8. This corporation owes the current year Intangible Personal Property Tax.  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FEIG, MARC I  
8000 PETERS RD  
PLANTATION FL 33324

81 Name  
Frankie Pito, Jr.

82 Street Address (P.O. Box Number is Not Acceptable)

83 SALS CORPORATE  
10026 SPANISH ISLES BLVD  
B16 & B17 FL  
BOCA RATON, FL. 33498

84 City Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation has been changed 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 *Frankie Pito, Jr.*

Frankie Pito, Jr. - 4/21/99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  DELETE  
NAME PTO, FRANK JR.  
STREET ADDRESS 7942 TENNYSON CT  
CITY-ST-ZIP BOCA RATON FL

1.1 TITLE  Change  Addition  
1.2 NAME 22581 Middletown Dr  
1.3 STREET ADDRESS BOCA Raton, FL 33428

TITLE  DELETE  
NAME PITO, CATHERINE  
STREET ADDRESS 7942 TENNYSON CT  
CITY-ST-ZIP BOCA RATON FL

2.1 TITLE  Change  Addition  
2.2 NAME 9044 Long Lake Palms Dr  
2.3 STREET ADDRESS BOCA Raton FL 33496

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Frankie Pito, Jr.*

SIGNATURE REQUIRED: Frank PITO JR - 4/21/99 - 561-470-3394

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CRZ034 (1/1/98)