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

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000085905 (5)

EAST COAST BURRITO FACTORY OF COMMERCIAL BLVD.,

FILED Apr 07 1998 8:00am Secretary of State



Principal Place	o of Business	Mailing Address			8181 JANUS BILLE IBINI 48181 BILL 1881	
PO BOX 840009 PO BOX 840009 HOLLYWOOD FL 33084 HOLLYWOOD FL 3		PO BOX 840009 HOLLYWOOD FL 33084		DO NOT WRITE IN T	HIS SPACE	
				3. Date Incorporated or Qualified		
				11/28/1994		
	lace of Business	26. Mailing Address		4. FEI Number	Applied For	
21		26		65-0537350	Not Applicable	
Suite, Apt		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	e	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zφ	Country	8. This corporation owes or has paid the	4m ·	
24	[25]	[29]	30	Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Curr	ent Registered Agent	04	10. Name and Address of New Registe	red Agent	
	rager, ross		81 Name	ESTYGGER CD)	+	
	DOO N HIATUS RD		82 Street Ad	82 Street Address (P.O. Box Number is Not Acceptable)		
PEMBROKE PINES FL 33026				XXX MICHUS K	oaci	
			83			
			84 Gity		85 Zip Code	
		4	1 Vien	Morokovines	FL 753026	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Satut	es, the above-named co	orporation submits this statement for the purporation's board of directors. I hereby accept the	se of changing its registered	
office or r	egistered agent, or both, in the Sta m familiar with, and accept the obt	ite of Florida. Such change was a ligations of, Section 607,0505,016	withorized by the corpor orida Statutes.	ration's board of directors, I hereby accept the	appointment as registered	
SIGNATURE	•	(dro)	Lance	*	Wes	
SIGNATURE	Signature: Typed or printed name of registered a		· Register 4 Sent signature req	quired when reinstating)	(IE	
12.	OFFICERS A	IND DIRECTORS	13.7	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 TITLE		Change Addition	
NAME	LEVINE, NED		1.2 NAME			
STREET ADDRESS	261 E COMMERCIAL BLVI	D	1.3 STREET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE FL 3333		1.4 CITY - ST - ZIP			
TITLE		DELETE	2.1 TITLE		Change Addition	
NAME			2.2 NAME		-	
STREET ADDRESS			2.3 STREET ADDRESS			
CiTY-S1-ZIP			2. 4 CiTY-ST-ZIP			
TITLE		DECETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME		_ ,	
STREET ADDRESS			3 3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3 4. CITY-S1-ZIP 4 1 TITLE		Change Addition	
. 1			•		C Change C Noomen	
NAME PTOTET ADDRESS			4 2 NAME			
STREET ADDRESS			4 3 STREET ADDRESS			
CITY+ST-ZIP		Drugg.	4.4 CITY-ST-ZIP		Change Addition	
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAMÉ			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			63 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			
14. I hereby o	certify that the information supplied	with this filing does not qualify fo	or the exemption stated	in Section 119.07(3)(i), Florida Statutes. I furth	er certify that the information	
indicated officer or Block 12 (on this annual report or supplement director of the corporation or the re or Block 13 if changed, or on an at	nue annum report is true and acc aceiver or traspe empowered to o thin int will an address.	urate and that my signa execute this report as re	in Section 119.07(3)(i), Florida Statutes, 1 furniture shall have the same legal effect as if mac equired by Chapter 607, Florida Statutes; and	that my name appears in	