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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P9400091656 (6)

25TH STREET RESTAURANT, INC.

Principal Place of Business Mailing Address % G. T. MCDONALD ENTERPRISES % G. T. MCDONALD ENTERPRISES 7951 S.W. 6TH ST., SUITE 112 7951 S.W. 6TH ST., SUITE 112 PLANTATION FL 33324 PLANTATION FL 33324-3211 3. Date Incorporated or Qualified 3a. Date of Last Report 12/13/1994 05/21/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0570081 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zio 8. This corporation has liability for intangible tax under s. 199.032, Country 24 25 29 30 Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name CORPORATION SERVICE COMPANY 1201 HAYS STREET 62 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 В3 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. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signatine typed or prated name of registined agent and tills if applicable. (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)DELETE TITLE 1.1 TITLE Change Addition MCDONALD, GERALD T NAME 1.2 NAME 7951 S.W. 6TH ST., SUITE 112 STREET ADDRESS 1.3 STREET ADDRESS PLANTATION FL 33324 CITY-SI-ZIP 1.4 CITY-ST-ZIP DELETE THEFE 2.1 TATLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - \$1 - 7IP 2. 4 CITY-ST-ZIP DELETE THLE Change Addition 3 STATE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS C(TY+S1+Z)P3.4. CITY-ST-ZIP DELETE Change TITLE 4.1 TITLE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-SI-ZIP 4.4 CITY-ST-ZIP DELETE Addition Tille 5.1 TITLE NAME **5.2 NAME** STREET ADDRESS 5.3 STREET ADDRESS CHTY-ST-ZIP 5.4 CHTY-ST-ZIP DELETE THILE 6.1 TITLE Change ☐ Addition NAME: 6.2 NAME

6.3 STREET ADDRESS 6.4 City-ST-ZiP 14. I do 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

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICIAL ON DIRECTOR (A)

appears in Rlock 12 or Block 13 if changed, or on an attachment with an address.

CR2E034

FILED

May 14 1997 8:00am

Secretary of State