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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 21 1997 8:00am Secretary of State

DOCUMENT 1. Corporation Name	#	P95000000735	(7)
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TJ'S RESTAURANT EQUIPMENT SERVICES, INC. Principal Place of Business Mailing Address 626 GRAND CANAL ST CLEARWATER FL 34616 CLEARWATER FL 34616				* 1						
						3. Date Incorporated 01/03/1995	or Qualified	3a. Date (eport
2. Principal F 21	Place of Business	2a. Mailing /	ddress			4. FEI Number 59-3287083			h	plied For t Applicable
Suite Apt.	. #, etc.	Suite, Ap	t. #, etc.			Certificate of Statu	s Desired			Additional
City & Stat	de	City & St	ate	······································	· · · · · · · · · · · · · · · · · · ·	6. Election Campaign	-		\$5.00	May Be
23 Zip	Country	Zip		Cour	niry	B. This corporation ha	as liability for in			
24	25] 9. Name and Address of Curre	29 ent Registered Age	int	30]		Florida Statutes 10. Name and Addres		Yes t		
6358	IGHAN, JAMES K 8 3RD AVE S PETERSBURG FL 33707			,	B1 Name B2 Street A	Address (P.O. Box Number is	Not Acceptabl	e)		
11. Pursuant office or	t to the provisions of Sections 607.05 registered agent, or both, in the Stat am familiar with, and accept the obli	502 and 607.1508, F	lorida Statu	- 1	64 City	corporation submits this state	ment for the pu	FL (1	Code s registered registered
agent La	am familiar with, and accept the obli	gations of Section	hange was 607.0505, Fi	authorized Iorida Statu	by the corp ites.	poration's board of directors. I	hereby accep	t tre appoint	mont go	
SIGNATURE	Signature, typed or printed name of registered a	gent and lele if applicable		TE: Registered		required when reinstalling)		DATE		
SIGNATURE	Signature, typed or printed name of registered a	igent and little if applicable	(NOI	1E: Registered	Agent signature			DATE ERS AND DI	RECTOR	S IN 12
SIGNATURE 12. THE NAME SIREH ADDRESS	Signature, typed or printed name of registered a OFFICERS AI P VAUGHAN, JAMES K 6358 3RD AVE S.	igent and little if applicable		13. 1.1 TITE 1.2 NAI 1.3 \$7F	Agent signature E WE REET ADDRESS	required when reinstalling)		DATE ERS AND DI		
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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, the lam an officer or director of the corporation or the regiver 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, of on a valtachment with an address.

SIGNATURE: X

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

K4-14-97)

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