

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

FILED
May 28 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000010219
 1. Corporation Name
MIAMI FRANCHISE DEVELOPMENT CORP.

Principal Place of Business: **3550 BISCAYNE BLVD.**
SUITE # 400
MIAMI FL 33137

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified: **02-03-95**

4. FEI Number: **65-0570463** Applied For: Not Applicable:

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30: Yes No

21. Principal Place of Business Suite, Apt. #, etc.	26. Mailing Address Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip Country	28. Zip Country
24. Zip Country	29. Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name: **WILLIE BARNETT**

82 Street Address (P.O. Box Number is Not Acceptable): **3550 BISCAYNE BLVD.**

83 **SUITE # 400**

84 City: **MIAMI FL** 85 Zip Code: **33137**

11. Pursuant to the provisions of Sections 607.0602 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. I am familiar with, and accept, the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: *Willie Barnett* **WILLIE BARNETT** DATE: **7-28-98**

12. OFFICERS AND DIRECTORS

TITLE	P.T.S	<input type="checkbox"/> DELETE
NAME	WILLIE BARNETT	
STREET ADDRESS	3550 BISCAYNE BLVD. # 400	
CITY-ST-ZIP	MIAMI FL 33137	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 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, 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 deleted with an address.

SIGNATURE: *Willie Barnett* **WILLIE BARNETT** DATE: **7-28-98** DAYTIME PHONE: **964-1293**

CR2E034 (10/97)