

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000013686 (7)

1. Corporation Name

ROADHOUSE GRILL COMMERCIAL, INC.



Principal Place of Business

4801 S UNIVERSITY DR  
SUITE 304 E  
DAVIE FL 33328

Mailing Address

4801 S UNIVERSITY DR  
SUITE 304 E  
DAVIE FL 33328

2. Principal Place of Business

2a. Mailing Address

21 6600 N. ANDREWS AVE

26 6600 N. ANDREWS AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 160

27 SUITE 160

City & State

City & State

23 FT. LAUDERDALE FL

28 FT. LAUDERDALE, FL

Zip

Country

Zip

Country

24 33309

25 USA

29 33309

30

3. Date Incorporated or Qualified

02/17/1995

3a. Date of Last Report

4. FEI Number

☒ 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 has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BARNETT, CHARLES D  
899 W CYPRESS CREEK RD  
SUITE 500  
FT LAUDERDALE FL 33309

81 Name

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

83

84 City

FL

85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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 D ☐ DELETE  
NAME TOOLE, J. DAVID III  
STREET ADDRESS 4801 S UNIVERSITY DR SUITE 304 E  
CITY-ST-ZIP DAVIE FL 33328

1.1 TITLE D/P ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS 6600 N. ANDREWS AVENUE, Suite 160  
1.4 CITY-ST-ZIP FT LAUDERDALE, FL 33309

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.1 TITLE S ☐ Change ☒ Addition  
2.2 NAME CHARLES D. BARNETT  
2.3 STREET ADDRESS 899 W. Cypress Creek Rd, Suite 500  
2.4 CITY-ST-ZIP

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 8000001746728 ☐ Change ☐ Addition  
5.2 NAME -03/18/96--01045--001  
5.3 STREET ADDRESS \*\*\*200.00  
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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Charles D. Barnett CHARLES D. BARNETT 1/22/96 954-489-7317  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)

13-18-1996