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

#### PROFIT CORPORATION ANNUAL REPORT



### FLORIDA DEPARTMENT OF STATE

#### Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998_	COUNT TO SERVICE OF THE PARTY O		
DOCUMENT #	P950000146		

# FILED Mar 23 1998 8:00am Secretary of State

DOCUMEN	CUMENT # P95000019660					
	ADAMAR SEAFOOD RESTAURANT, INC.					
DHALLMIN		ין כנטי	11 17 KM	/ /	<i>, C</i> .	
Principal Place of Bus	siness		Mailing Address			
830 50	1 72	AUE				
						DO NOT MOTE IN THIS SPACE
MIAMI	FL 3	33/4	4			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified
, , , , , , , , , , , , , , , , , , , ,	•					FEBRUARY 20 1995
2. Principal Place of	Business		2a. Maring Address			4. FEI Number Applied For
21			26			65-0570929 Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.			SR 75 Additional
22			27			5. Certificate of Status Desired Fee Required
City & State			City & State			Election Campaign Financing \$5.00 May Be
23			28			Trust Fund Contribution
Zip	Country		Zip	Cour	ntry	8. This corporation owes or has paid the current year intangible
24]	25 ame and Address	of Current	29 Agestered Agent	[30]		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent
					81 Name	10. Hame and Address of Herr Hagistered Agent
ARNOLD	COTIE	RREZ	<u>2</u>	Ļ		
830 50	a) フム	All	<b>=</b> .	l'	82 Street Add	dress (P.O. Box Number is Not Acceptable)
				ļ.	83	<del></del>
MIAMI FL 33144		)_				
		[	84 City FL 85 Zip Code			
11. Pursuant to the pr	rovisions of Sections	607 0502	and 607 1508, Fiorida Statul	es, the ab	ove-named cor	poration submits this statement for the purpose of changing its registered
office or registere agent. Lam famili-	d agent, or both in ar with, and accept.	the State of the obligati	r lorida. Such change was a ons of, Section 607.0505, FI	autnorized orida Statu	by the corpora ites.	ation's board of directors. I hereby accept the appointment as registered
SIGNATURE _						
SIGNATURE	typind or printed starte of 9	open op a auchtig	and the diapolicable (NOT		Agent signature requ	ured wher reinstating)  DATE  ADDITIONS (CHANGES TO DESCRIPTION AND DIRECTORS)
THE PRES			DIRECTORS	13. 11100		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
			TIERRE ZELETE	1.2 NAME		
SIREET ADDRESS 8	30 SW	72	AUE'		REET ADORESS	
CITY-ST-ZIP	30 SW MIAMI	FL	33/44		Y-ST-ZIP	
TITLE		<del></del>	DELETE	2 1 117		☐ Change ☐ Addition
NAME				2 2 NAM	ΛΕ .	
STREET ADDRESS				2 3 STR	EET ADDRESS	
CITY-S1-ZIP				2 4 CIT	Y - S1 - 7IP	
सार			DELETE	3 1 TIQ	,E,	☐ Change ☐ Addition
NAME				3.2 NAM	,	1
STREET ADDRESS				3 3 STR	EET ADORESS	
CITY-SI-ZIP		······································	T ocusts		Y-SI-ZIP	
TITLE			DELETÉ	4 1 TITL	ſ	☐ Change ☐ Addition
NAME OLOGET ADDITION				4. 2 NAI		
STREET ADDRESS					EFT ADDRESS	1
CITY-ST-ZIP TITLE			DELETE	5 1 THE	r ST-7iP	☐ Change ☐ Addition
NAME			and the second	5.2 NAN	í	A Auditoria
STREET ADDRESS					FET ADORESS	7000
CITY-ST ZIP					Y-\$1-ZIP	3,23
TITLE			DELETE	6 1 7 II L		Change Addition
NAME				6.2 NAN	AE ·	00002465460 Addition -03/23/9801074004
STREET ADDRESS				63 S FR	FF1 ADDRESS	-03/23/98010/4004
CITY-ST-ZIP					r-SI-ZIP	***IOU.UU
14. Thereby certify the	at the information 5:	ipplied with	this filling does not qualify f	or the exer	nption stated in	Section 119.07(3)(i), Florida Statutes. I further certify that the information

i. I hereby certify first the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this armual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under early that I am an officer or director of the corporation of 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 any material with an admittable.

SIGNATURE:

SNATURE AND TYPED OR PRINTED NAME OF SIGNING DEFICER OR DIRECTO

le Daylime Priorie II

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