

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000043211 (8)

1. Corporation Name

BROWARD RESTAURANT CORP.

Principal Place of Business

~~1940 HARRISON ST
SUITE 300
HOLLYWOOD FL 33020~~

Mailing Address

~~1940 HARRISON ST
SUITE 300
HOLLYWOOD FL 33020~~



2. Principal Place of Business

2a. Mailing Address

21 1851 N. Federal Highway

26 8333 West McNab Rd.

3. Date Incorporated or Qualified
05/30/1995

3a. Date of Last Report

New

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number
65-0582844

Applied For
Not Applicable

22 City & State

27 Suite 220

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23 Hollywood FL

28 Tamarac FL

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24 Zip 33020

25 Country USA

29 Zip 33321

30 Country USA

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

ROBERT A. ARABIAN, P.A.
8333 W MCNAB RD
SUITE 220
TAMARAC FL 33321

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 (if not a natural person)

(If the Registered Agent is a corporation, type the name of the corporation)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

D
CENAMI, ROBERT B

NAME

STREET ADDRESS

CITY-ST-ZIP

~~1940 HARRISON ST SUITE 300
HOLLYWOOD FL 33020~~

TITLE

D
SANDLER, KENNETH B

NAME

STREET ADDRESS

CITY-ST-ZIP

~~1940 HARRISON ST SUITE 300
HOLLYWOOD FL 33020~~

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

D, P, T
Robert B Cenami
1401 N. 16th Ave.
Hollywood, FL 33020

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

D, V, P, S
Kenneth B. Sandler
8333 W. McNab Rd. Suite 220
Tamarac, FL 33321

☒ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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: Kenneth B Sandler - V.P.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-28-96 954-722-1929

Date

Daytime Phone

CR2E034 (12/95)