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

PROFIT CORPORATION ANNUAL REPORT

1998

24

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500046385 (7)

MICHEAL'S STEAK & SEAFOOD, INC.

Principal Place of Business

5420 GALL BLVD

ZERPHYRHILLS FL 33540

DO NOT WRIT

3. Date Incorporated or Qualified

06/09/1995

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

59-33 17570

06/09/1995 4. FEI Number 26 59-3317570 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 22 City & State City & State 6. Election Campaign Financing 23 28 Trust Fund Contribution Zip Country Zip Country

8. This corporation owes or has paid the current year Intangible 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HUYNH, HUNG 5420 GALL BLVD 82 Street Address (P.O. Box Number is Not Acceptable) ZERPHYRHILLS FL 33540 83

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, and accept the obligations of, Section 607,0505, Florida Statutes.

84 City

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition DELETE Change TITLE D 1.1 TITLE NAME HUNYH, HUNG 1.2 NAME 4214 LAKE MARIANNA DR STREET ADDRESS 1.3 STREET ADDRESS City-St-7iP WINTER HAVEN FL 33880 1.4 CITY - ST - 7IP DELETE Change ■ Addition TITLE 2.1 TITLE NAME HUNYH, KIM 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 4214 LAKE MARIANNA DR CITY-ST-ZIP WINTER HAVEN FL 33880 2. 4 CITY - ST - ZIP DELETE Change __ Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME 4 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE ☐ Change Addition NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

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 suppliemental 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 trystee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change it, or on an attachment with an address.

1-15-012

(912) 730-96

FILED

Jan 23 1998 8:00am

DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Zip Code

Not Applicable

Secretary of State