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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000054323 (7)

HOOTERS OF AVENTURA, INC.

FILED May 14 1998 8:00am Secretary of State



Principal Place of Business		Mailing Add	Mailing Address			e 10011000 110 10101 Otalit Calit Calit Calit Calit Calit Calit City City City Calit Calit			
20001 BISCAYNE BLVD.			4411 CLEVELAND AVE.						
NO. MIAMI BCH. FL 33180		FT. MYERS FL 33901			DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified		7102	····
						07/10/1995			İ
2. Principal P	lace of Business	2a. Mailing	Address		_	4. FEI Number		A	plied For
21		26				65-0650576			t Applicable
Sulte, Apt. #, etc.			Suite, Apt. #, etc.					\$8.75	
22		27	27			5. Certificate of Status Desired		Fee Re	
City & State		City & St	City & State			6. Election Campaign Financing		\$5.00	May Be
23		28	28			Trust Fund Contribution		Added t	
Zip	Country	Zφ		Country	у	8. This corporation owes or has p	aid the curr	eg¥year Int	angible
24	25	29	30	J		Personal Property Tax due Jur			No
	9. Name and Address of Curre	nt Registered Age	ent		T-:	10. Name and Address of New F	tegistered A	lgent	
GAI	RGANO, ANTHONY J			81	Name				
1520 ROYAL PALM SQUARE BLVD #260			82	Street A	Address (P.O. Box Number is Not Accept	able)			
FT MYERS FL 33919				,		75 W FIRST ST			
				83	'	· ·	UITE_	203	
				84	City			85 Zip (Code
					14	MIERS	<u> </u>	1 1 23	901 i
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.									
agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.									
SIGNATURE Signature typed or protect name of it goldered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) DATE									
12.		D DIRECTORS	(1011	13.	on signature	ADDITIONS/CHANGES TO OFF		DIRECTOR	S IN 12
TITLE	DCEO		DELETE	1.1 TITLE				Change	☐ Addition
NAME	LAGESCHULTE, DAVID L			1.2 NAME	i				
STREET ADDRESS	4411 CLEVELAND AVE			1.3 STREE	TADORESS				
CITY-ST-ZIP	FT MYERS FL			1.4 CITY-	ST-ZIP				
TITLE	DST	Ţ	DELETE	2.1 TITLE			·	Change	Addition
NAME	LYNCH, PAUL			2.2 NAME					
STREET ADDRESS	4411 CLEVELAND AVE			2.3 STREE	1 ADDRESS				
CITY-ST-ZIP	FT MYERS FL			2. 4 CITY-	ST-ZIP				
TITLE	ĎΡ	T.	DELETE	3.1 TITLE				Change	Addition
NAME	BRAWNER, TERRY			3.2 NAME					
STREET ADDRESS	4411 CLEVELAND AVE			3.3 STREE	T ADDRESS				
CITY-ST-ZIP	FT MYERS FL			3.4. CITY-	ST-7IP				
TITLE	Ď		DELETE	4.1 TITLE			***************************************	Change	Addition
NAME	KLINGENSMITH, KIT A			4. 2 NAME	:				
STREET ADDRESS	4411 CLEVELAND AVCE			4.3 STREE	T ADDRESS				
CITY-ST-ZIP	FT MEYERS FL			4.4 CITY- :	ST-ZIP				
TITLE	D		DELETE	5.1 TITLE				Change	Addition
NAME	Re gnier, dale r			5.2 NAME					
STREET ADDRESS	4411 CLEVELAND AVE			5.3 STREE	T ADDRESS				
CITY-ST-ZIP	FT MEYERS FL			5.4 CITY-1	ST-ZIP				
TITLE			DELETE	61 TITLE				Change	Addition
NAME				6.2 NAME					
STREET ADDRESS				6.3 STREE	T ADDRESS				
CRTY-ST-ZIP				64 CITY-1	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 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 amulticulty ent with an address.

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201-225 1770