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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # P95000061137 (2)

SHIRLEY'S RESTAURANT GROUP, INC.

Mailing Address



4491 SOUTHV							
	VEST 52ND COURT. UNIT 4 RDALE FL 33314	4491 SOUTHWEST 529 FORT LAUDERDALE FO		UNIT 4			
					3. Date Incorporated or Qualified 08/08/1995	3a. Date of Las	
. Principa: Pia	ice of Business	2a, Mailing Address			4. FEI Number	· <del>-</del>	Applied For
		26		(05-060060	a t	Not Applicable	
Suite Apt. #	*, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8	.75 Additional
		27			5. Certificate of Status Desired	□ F	ee Required
City & State		City & State			6. Election Campaign Financing	\$5	.00 May Be
		28			Trust Fund Contribution	A	dded to Fees
Zιρ	Country	Zip	Cou	ntry	8. This corporation has liability for		ers 199.032,
	25	29	30			No	
	9. Name and Address of Cur	rent Registered Agent		<b>64</b> N	10. Name and Address of New F	legistereo Agent	
				81 Name	Ronald w. Simi	39n	
THE LAV	v firm of Lawrence J SPI	iegel Chrtd			Address (P.O. Box Number is Not Acceptai	ile) -14 (	
	ieria avenue			1140	il sw 52 rd cou	7 * '	
CORAL	Gables FL 33134			83			
				<b>84</b> City_	. A fin	<b></b> 85	Zip Code 3 3314
				To	a Landerdale	FL ["	
. Pursuant t	u the provisions of Sections 607.0	502 and 607,1508, Florida Statut	es, the abo	ive named co	rporation submits this statement for the pu	rpose of changing Jointment as registe	its registered officered agent
familiar wit	h, and accept the obtations of S	Section 607.0505, Florida Statutes	S.	orporation a	board of directors. I hereby accept the app	-4-	A C
3NATURE	XR-	Ro	_ —	Emp		$\mathcal{A}\mathcal{A}$	146
ara-ki Cirke _	Signature typed or placed merre of registers dia		O <sup>7</sup> (- Ragistered		edinast was unastanid	UAIE	
	OFFICERS.	AND DIRECTORS	13.				TODE IN 19
					ADDITIONS/CHANGES TO OFF		
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4. Too 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 triat my signature shall have the same logal effect as if made under oath; that I are 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 of Block 13 of langed, or off an attachment with an address.

SIGNATURE

GNATURE AND TYPED OR PRINTED NAME OF SONING OFFICER OR DIRECTO

PON SEMPSON

212196

791-1548