

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

**PROFIT CORPORATION ANNUAL REPORT 1997**



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

**FILED**

97 JUN 30 AM 8:53

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**DOCUMENT # P95000065594 (0)**  
 1. Corporation Name  
**ALL STATE RESTAURANT SERVICE, INC.**



Principal Place of Business  
**610 43RD STREET WEST PALM BEACH FL 33407 US**

Mailing Address  
**610 43RD STREET WEST PALM BEACH FL 33407-3848 US**

3. Date Incorporated or Qualified **08/23/1995** 3a. Date of Last Report **08/14/1996**

2. Principal Place of Business  
 21 **610 43<sup>RD</sup> ST** 26 **610 43<sup>RD</sup> ST**

4. FET Number **APPLIED FOR** Applied For  Not Applicable

22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

23 **WEST PALM BCH FL** 28 **WEST PALM BCH FL**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

24 **33407** 25 **USA** 29 Zip Country 30 Zip Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
**SPURLOCK, KYLE**  
**610 43RD STREET**  
**WEST PALM BEACH FL 33407**

10. Name and Address of New Registered Agent  
 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 *Kyle R. Spurlock* **Kyle R. Spurlock** **5-1-97**  
 Signature of individual registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	<b>PD</b>	DELETE
NAME	<b>SPURLOCK, KYLE</b>	
STREET ADDRESS	<b>1180 CABANA ROAD</b>	
CITY-ST-ZIP	<b>RIEIRA BEACH FL 33404</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<b>PD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>SPURLOCK, KYLE</b>	
1.3 STREET ADDRESS	<b>610 43<sup>RD</sup> STREET</b>	
1.4 CITY-ST-ZIP	<b>WEST PALM BEACH FL 33407</b>	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	<b>800002232448--9</b>	
2.3 STREET ADDRESS	<b>-07/08/97--01037--008</b>	
2.4 CITY-ST-ZIP	<b>****165.00 ****165.00</b>	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 an attachment with an address.

SIGNATURE: *Kyle R. Spurlock* **Kyle R. Spurlock** **5/1/97** **541-881-4594**

CR2E034 (9/96)