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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Apr 25 1997 8:00am

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Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000079139 (8)

SPEED CAFE INC.

Principal Plac	e of Business	Mailing Address		I EBENGOON AND NINNAN ON HAT OOD HAT ON HAT IN HAT HAT IN	7 6 111 10810 10181 51000 51110 1011 1801
2401 N.E. 15TH ST POMPANO BCH FL 33062 US		2401 N.E. 15TH ST POMPANO BCH FL 33062- US	8258		
				 Date Incorporated or Qualified 10/10/1995 	3a. Date of Last Report 05/01/1996
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		65-0613744	Not Applicable
22 City & State		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip.	Country	Zip	Country	8. This corporation has liability for in	***************************************
24	25		30	Florida Statutes	Yes No
· · · · · · · · · · · · · · · · · · ·	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Reg	Istered Agent
OLSAVSKY, RANDALL 81 Name Latricio Varas					
2401 N.E. 15TH ST 82 Street Address (dress (P.O. Box Number is Not Acceptable	9)
POMPANO BCH FL 33062				2401 NE 15 St	·
83 🗸				Homoano Bon Fr	_ 330Xe2_
	_		84 City		85 Zip Code
	<u> </u>				FL
11. Pursuant to the provisions of Sections 607.0\02 and 607.1\02 and 6					
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	1 Current	_مىعر	TATUCIO	NAUS 4/5/	9.7
12.	Sign auto, typed or printed name of registered ac OFFICERS AN	ID DIRECTORS	: Registered Agent signature req	ADDITIONS/CHANGES TO OFFICE	DATE DIRECTORS IN 12
TITLE	DP CITIER IS A	DELFTE	1.1 TITLE	Dresident	Change Addition
NAME	OLSAVSKY, RANDALL C	A second	1.2 NAME	Intricio Varas.	
STREET ADDRESS	2760 SE 13TH CT		1.3 STHEET ADDRESS	Tolory SWIISCHE	معنا
CITY-ST-ZIP	POMPANO BEACH FL		1.4 CITY - ST - 7IP	Miam 5- 33119	2 33062
JULE		DELLTE	2.1 TITLE	Line Dusident See	Change Addition
NAME			2.2 NAME	Main Anhair	rate of
STREET ADDRESS			2.3 STREET ADDRESS	12523 Hampres DC	V
CITY-ST-ZIP			2 4 CITY-ST-7IP	Boca latin Fr 32	3434
TITLE		☐ DELETE	31 THLE		Change Addition
NAME		\mathcal{M}	3.2 NAME		
STREET ADDRESS		λ// \(\) ^ν	3.3 STREET ADDRESS		
CITY-ST-ZIP		-15-11/J	3.4. CITY-ST-7IP		
TITLE		DELLETE -	4.1 TIDLE		☐ Change ☐ Addition
NAME	(\mathcal{O})	1 X/Xa /	4. 2 NAME		
STREET ADDRESS	λ_0	\wedge \wedge $//g_{\wedge}$,	4.3 STREET ADDRESS		
CITY-ST-ZIP		— <u> </u>	4.4 City - St - ZiP	<u> </u>	
TITLE		Or / DECEME	5.1 TITLE		L Change L Addition
NAME			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
-CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP		Change Addition
TITLE		LJ Dutt	611016		Change Addition
NAME CONTEST ADDRESS			6.2 NAME		
STREET ADDRESS		e e e e e e e e e e e e e e e e e e e	6.3 STREET ADDRESS		
CITY-ST-ZIP	ov certify that the information supplied	ed with this filing doos not qualif	v for the exemption state	ed 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 any that my signature shall have the same legal effect as if made under eath; that					
Information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under eath; that I am an officer or director of the corporation of the receiver or trustle and sowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed by on an attachment with an address.					