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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000097079 (4)

ERIC'S BAR-B-Q CO., INC.

## FILED Feb 02 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 611 SW 178TH WAY 611 SW 178TH WAY PEMBROKE PINES FL 33029-4106 PEMBROKE PINES FL 33029-4106 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/18/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 10040 PINES 611 5 w 178 WAY Suite, Apt. #, etc. 65-0633536 BLVA Not Applicable Sulte, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing PEMBROLE PINES  $\Box$ PEMBROKO 23 28] Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Yes 25 29 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent GORDON, ERIC 81 Name 611 SW 178 WAY 82 Street Address (P.O. Box Number is Not Acceptable) PEMBROKE PINES FL 33029 83 City 85 Zip Code 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 Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE Change Addition 11 TITLE GORDON, ERIC M NAME 1.2 NAME 611 SW 178 WAY STREET ADDRESS 1.3 STREET ADDRESS PEMBROKE PINES FL 33029 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE Change Addition 21 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-7IE TITLE DELETE Change \_\_\_ Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-\$T-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIF 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE ☐ Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. Thereby 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.

CIGNATURE

SM lorda

TRUE M GOLRALAS

1/23/04

604-472, 7747