


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

FILED

**May 11 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000008168 (2)
1. Corporation Name
GIGI'S TAVERN, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 433 PLAZA REAL STE. 275 BOCA RATON FL 33432 US	Mailing Address 433 PLAZA REAL STE. 275 BOCA RATON FL 33432 US
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3. Date Incorporated or Qualified 01/25/1996	4. FEI Number 66-0634371	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

2. Principal Place of Business 21 333 W. Camino Gardens Blvd	2a. Mailing Address 26 333 W. Camino Gardens Blvd
Suite, Apt. #, etc. 22 Ste 203	Suite, Apt. #, etc. 27 Ste 203
City & State 23 Boca Raton, FL	City & State 28 Boca Raton, FL
Zip 24 33432	Country 25 US
Zip 29 33432	Country 30 US

9. Name and Address of Current Registered Agent

**SCIARRETTA, STEVEN ESQ.
2300 GLADES ROAD
SUITE 302-E
BOCA RATON FL 33431**

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	DT	<input type="checkbox"/> DELETE
NAME	BLASLAND, WARREN V JR.	
STREET ADDRESS	185 N.W. SPANISH RIVER BLVD., STE. 110	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	VOZZO, LARRY	
STREET ADDRESS	185 NEW SPANISH RIVER BLVD.	
CITY-ST-ZIP	BOCA RATON FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	ALTERMAN, KARL	
STREET ADDRESS	433 PLAZA REAL, STE. 275	
CITY-ST-ZIP	BOCA RATON FL	
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	DTS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS	333 W. Camino Gardens Blvd Ste 203	
1.4 CITY-ST-ZIP	Boca Raton, FL 33432	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS	333 W. Camino Gardens Blvd 203	
3.4 CITY-ST-ZIP	Boca Raton, FL 33432	
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 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: Karl Alterman **4/30/98** **561 447-7327**

CFR2034 (10/97)