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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # **P9600009043** (6)

HARDEE'S ENTERPRISES INC

Principal Place of Business

624 59TH ST. S. ST. PETERSBURG FL 33707 Mailing Address

624 59TH ST. S.

ST. PETERSBURG FL 33707-2411

## FILED Apr 30 1997 8:00am Secretary of State



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								3. Date Incorporated or Qualified 3a. Date of Last Report 01/26/1996					
2. Principal P			2a. Mailing Address					4. FEI Number		1	\pplied For		
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Sulte, Apt.	#, etc.		Suite, Apt. #, etc. 27				5. Certificate of Status Desired	\$8.75 Additional Fee Required					
City & State TREAS	SURE I	SLAND,	City & State  28 TREASURE ISLAND, FL					Election Campaign Financing     Trust Fund Contribution					
Zip 33706							Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No			
	9. Name	and Address	of Curren	Registered A	\gent					10. Name and Address of New Re	gistered A	gent	
ZAB	OLOTNY, 8	TEVE					81	Name					
8800 49TH ST. N., STE. 406-5 PINELLAS PARK FL 34666							82 Street Addre			ss (P.O. Box Number is Not Acceptab	de)		
										ss (P.O. Box Number is not Acceptat	леј		
1 16.48-	LLYV I MI												
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							84	City			<b>E</b> 1	85 Zij	o Code
44 Disease	to the oronic	lana at Contin	COZ OCO	0 and 607 44 00	) Clasida Ptatu	too the of				ration submits this statement for the p	L_	<u> </u>	ito registered
office or r	egistered ac	gent, or both, i	n the State	of Florida, Suc	h change was	authorize	d by	the corp	corpo	ration submits this statement for the pon's board of directors. I hereby accept	ourpose or of the appo	cnanging intment a	is registered
agent. I a	m familiar w	ith, and accep	of the obliga	itions of, Section	on 607.Ö505, FI	orida Stat	utes	S.		,			, i
SIGNATURE										· · · · · · · · · · · · · · · · · · ·			
12.	Signature, typed			of and fille if applical  DIRECTORS	ble. (NO	It Registere	d Agr	ent signature	required	ADDITIONS/CHANGES TO OFFIC	DATE	DIDECTO	SDC IN 13
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NAME	KRYST	YNA A.	HÁRD	EE				į					
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NAME						4. 2 N							
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NAME						5.2 N	JMA	İ					
STREET ADDRESS						5.3 S	TREET	I ADDRESS					
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NAME						6.2 N	AME						
STREET ADDRESS						6.3 S	TREET	ADDRESS					
CITY-ST-ZIP						640	ITY-S	ST - 7IP	<u></u>				
	by cortify the	at the informati	on eupolio	South this filing	does not qual				totod i	in Section 119 07/3)(i) Florida Statute	e I further	corlify th	at 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.

IGNATIBE: \$\square\text{3} \square\text{3} \squa