PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

P96000022597 (4) DOCUMENT #

RICKEY'S AT SILVER LAKES, INC.

FILED Jan 21 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address					
	WOOD BLVD	4799 HOLLYWOOD BLVD)				
HOLLYWOOI	D FL 33021	HOLLYWOOD FL 33021			DO NOT WORK IN THE	COACC	
					DO NOT WRITE IN THIS 3. Date incorporated or Qualified	SPACE	
					03/13/1996		
O Oringinal C	None of Divisions	De Mailing Address			4. FEI Number		A
	Place of Business	2a. Mailing Address			65-0653351		Applied For
21 220 NW 180 Th AVC 26 Suite, Apt. #, etc.					007/000001	1 1	Not Applicable
	#, etc.	· — ·	Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional Required
22 City & Stat		City & State			A. Flankin America Financia		
	1BROKE PINES FL				Election Campaign Financing Trust Fund Contribution		O May Be d to Fees
Zip	Country	Zip	Countr		This corporation owes or has paid the cur		
	29 25	29	30	,			∏ No
241 0 0	9. Name and Address of Current		1301		10. Name and Address of New Registered		
91	TRIAR, MICHAEL P	g	81	Name	10.		
1							
4601 SHERIDAN STREET STE 500 HOLLYWOOD FL 33021				82 Street Address (P.O. Box Number is Not Acceptable)			
1 11	JELI WOOD FL 33021		83				
			100				
			84	City		85 Zi	p Code
11. Pursuant	to the provisions of Sections 607.0502	t and 607.1508, Florida Statute of Florida, Such change was a	es, the abov	e-named co v the corpor:	rporation submits this statement for the purpose o ation's board of directors. I hereby accept the app	changing) its registered es registered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Fig	orida Statute	S.	and the beauty of all better the transfer and app		
SIGNATURE							
	Signature, lyped or printed name of registered ager			ent signature req	ulred when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	
TITLE	PD	☐ DELETE	1.1 TITLE			Unange	Addition
NAME	MITCHELL, WILLIAM J		1,2 NAME				
STREET ADDRESS	4799 HOLLYWOOD BLVD		1.3 STREE	ADDRESS			
CITY - ST - ZIP	HOLLYWOOD FL 33021		1.4 CITY - 3	ST-ZIP			
TITLE	SD	☐ DELETE	2.1 TITLE			Change	e
NAME	MITCHELL, BARBARA		2.2 NAME				
STREET ADDRESS	4799 HOLLYWOOD BLVD		2,3 STREE	ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL 33021		2, 4 C/TY-	ST-ZIP			
TITLE		DELETE	3.1 TITLE	ł		Change	Addition
NAME			3.2 NAME	-			
STREET ADDRESS			3,3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY -	ST-ZIP			
TITLE		☐ DELETE	4,1 TITLE			Change	Addition
NAME			4, 2 NAME				
STREET AODRESS			4.3 STREET	•			
CITY-ST-ZIP			4.4 CITY-5	1			
TITLE		☐ DELETE	5.1 TITLE	. 41		Change	Addition
NAME.		'	5.2 NAME	İ		-	
			5.3 STREET	ADDRESS			
STREET ADDRESS							
CITY-ST-ZIP		☐ DELETE	5.4 CITY - 5 6.1 TITLE	1-4P		☐ Change	e Addition
TITLE		□ perete				onange	, LI MUNICUL
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET				
CITY-ST-ZIP		C 10-1-100	6.4 CITY-5		Carrier 440 07(0)() Florida Carrier 14 at		114
14. I bereby o	centry that the information supplied wit	n this tiling does not qualify fo	or the exemp	tton stated li	n Section 119.07(3)(i), Florida Statutes, I further ce	ruiv that th	te 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 cath, 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: