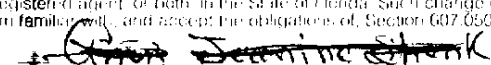
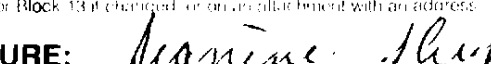


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Jun 24 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000027365 1. Corporation Name DRIVE THRU CONVENIENCE STORE INC.			
Principal Place of Business 2150 S STATE ROAD 7 MIRAMAR FL 33023		Mailing Address	
2. Principal Place of Business 21 SAME Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	
9. Name and Address of Current Registered Agent LAWRENCE J. SPEIGEL PA 343 ALMERIA AVE CORAL GABLES FL 33134		10. Name and Address of New Registered Agent 81 Name ANN ZIMMERMAN 82 Street Address (P.O. Box Number is Not Acceptable) 1900 Taylor 83 84 City Hollywood FL 85 Zip Code 33020	
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:  Ann Zimmerman DATE: 4/30/98			
12. OFFICERS AND DIRECTORS TITLE DPST NAME JEANINE SHENK STREET ADDRESS 45 NW 203 RD TR #15C CITY-ST-ZIP MIAMI FL 33169 DELETE TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11 TITLE DPST 12 NAME ANN ZIMMERMAN 13 STREET ADDRESS 1900 TAYLOR 14 CITY-ST-ZIP HOLLYWOOD FL 33020 CHANGE ADDITION 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP CHANGE ADDITION 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP CHANGE ADDITION 41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP CHANGE ADDITION 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP CHANGE ADDITION 61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP CHANGE ADDITION	
14. I hereby certify that the information furnished with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 resident 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 a supplemental filing with an address. SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

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