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FILED

Apr 10 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000049189 (9)

1. Corporation Name
SIZZLING FOOD CONCEPTS, INC.



Principal Place of Business

C/O KIRKPATRICK & LOCKHART
201 S BISCAYNE BLVD. 20TH FL
MIAMI FL 33131

Mailing Address

C/O KIRKPATRICK & LOCKHART
201 S BISCAYNE BLVD. 20TH FL
MIAMI FL 33131-4325

3. Date Incorporated or Qualified
06/04/1996

3a. Date of Last Report
none

2. Principal Place of Business

21 550 Biltmore Way

Suite, Apt. #, etc.

22 Suite 1110

City & State

23 Coral Gables FL

Zip

24 33134

25 USA

2a. Mailing Address

26 550 Biltmore Way

Suite, Apt. #, etc.

27 Suite 1110

City & State

28 Coral Gables FL

Zip

29 33134

Country

30 USA

4. FEI Number

65-0675680

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes ☒ No

9. Name and Address of Current Registered Agent

SCHECHTER, ROSA E
C/O KIRKPATRICK & LOCKHART
201 S BISCAYNE BLVD, 20TH FL
MIAMI FL 33131

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

Signature of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE Director
NAME Ricardo Warman
STREET ADDRESS 550 Biltmore Way, Suite 110
CITY- ST- ZIP Coral Gables, FL 33134

☐ DELETE

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

☐ Change ☐ Addition

14. I do 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:

[Signature]

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICARDO WARMAN, DIRECTOR

Date

Daytime Phone #

(305) 461-2440

Ext. 27

CR2E034 (9/96)