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**PROFIT** CORPORATION ANNUAL REPORT

1999



DOCUMENT # P96000056018

FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90031 023 \*\*\*150.00

Corporation Name	
IGUANA CANTINA, INC.	
	1881   1881   1882   1883   1884   1884   1884   1884   1884   1884   1884   1884   1884   1884   1884   1884

Principal Place	of Business	Mailing Address			( 100/100/ 110 101/ 01/11 00/11 C	iki Ofiki ujiuk alilu bilah unil	E)  4 <b>08</b> 1 (011 1001
3801 HOLLYWOOD BLVD. 3801 HOLLYWOOD BLVD.							
#101 #101				DO NOT WRITE IN THIS SPACE			
HOLLYWOOD F	L 33021	HOLLYWOOD FL 33021			3. Date Incorporated or Qualifed	72 111 1110 01 1102	
					07/02/1996		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	A	Applied For
21 339	o Mary St.	26			65-06966 <u>81</u>	l N	lot Applicable
Suite, Apt.	·	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1	Additional
22 SV1+		City & State		_			Required
City & State		28			6. Election Campaign Financing Trust Fund Contribution	<b>*</b>	May Be to Fees
23 (*CCO^	Country	Zip	Country		8. This corporation owes the curr		
24 3313		29 3	0		Personal Property Tax.	☐Yes	□No
	9. Name and Address of Current	Registered Agent		•	10. Name and Address of New I	Registered Agent	
VIIC	NICK HOWARD A			ame Rothst	ein Scott L	) ·	
	nick, howard a W. Broward Blvd.		<b>82</b> S	treet Addres	s (P.O. Box Number is Not Accepta	able)	
	E 420			ne	Financial Pla	12A	
	AUDERDALE FL 33324		83	Soite	2612		
		j.	84 C	ity	40.245.00	<b>□</b> 85 Zip	Code
44 Duraugat	to the provisions of Section 607.0603	and 207 1508 Florida Statutes	the above-na	med corner	ation submits this statement for the	purpose of changing it	3394 Is registered
office or re	egistered agent, op both, in the State	Florid Such change was auti	horized by the	corporation'	s board of directors. I hereby accept	ot the appointment as r	egistered
11. Pursuant to the provisions of Sections 607.0502 and 667.1508. 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, typed or frinted fame of registered alient	and title if applicable. (NOTE: R	egistered Agent sign	nature required w	hen reinstating)	DATE	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OF	<del></del>	
TITLE	DP '	DELETE	1.1 TITLE	PD	المدمدة	Change	Addition
NAME	VASU, MARK		1.2 NAME	Del	laney, Gevard of Hollywood Blu	d Sink MI	
STREET ADDRESS	3801 HOLLYWOOD BLVD. SUTI	E 101	1.3 STREET ADD	DRESS 380	of Hollywood bid		
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CITY-ST-ZIP	Ho	llywood FL 3	3021	Addition
TITLE	VP	DELETE	2.1 TITLE	UST	D' stabas T	Change	, D'Addition
NAME	MILLER, SHANNON	101	2.2 NAME	Cat	suti, Stephen J. Hollywood Blue	1. Suite 101	
STREET ADDRESS	3801 HOLLYWOOD BLVD., STE HOLLYWOOD FL	. IVI	2.3 STREET ADD			33021	
CITY-ST-ZIP	ST ST	DELETE	2. 4 CITY+ST-ZIF 3.1 TITLE	P 170	140000	□ Change	Addition
TITLE NAME	CAPUTI, STEVE	□ beceite	3.2 NAME				
STREET ADDRESS	3801 HOLLYWOOD BLVD., STE	101	3.3 STREET ADD	DRESS			
CITY-ST-ZIP	HOLLYWOOD FL	. 101	3.4. CITY-ST-ZIF				
TITLE		☐ DELETE	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADD	DRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP	,			
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADD				
CITY-ST-ZIP			5.4 CITY-ST-ZIP	<u> </u>			fill a state of
TITLE		☐ DELETE	6.1 TITLE			Change	e 🔲 Addition
NAME			62 NAME	ontee			
STREET ADDRESS	**		6.3 STREET ADD				
CfTY-ST-ZIP	triti		6.4 CITY-ST-ZIP				

14. I hereby certify that the information supplied with this sing 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 ap address, with all other like empowered.

SIGNATURE: \_

SIGNATURE AND TYPED OR PROPERTY NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #