
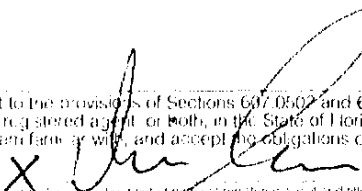
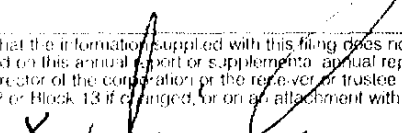


Mar 24 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1997</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # P96000057102 (1)</b>			
<b>1. Corporation Name:</b> <b>GUS' 12TH STREET CAFE, INC.</b>			
<b>Principal Place of Business:</b> <b>2594 12TH ST.</b> <b>SARASOTA FL 34237</b>		<b>Mailing Address:</b> <b>2594 12TH ST.</b> <b>SARASOTA FL 34237-2043</b>	
<b>2. Principal Place of Business:</b> <b>21</b> Suite, Apt. #, etc. <b>22</b> City & State <b>23</b> Zip <b>25</b> Country		<b>2a. Mailing Address:</b> <b>26</b> Suite, Apt. #, etc. <b>27</b> City & State <b>28</b> Zip <b>29</b> Country <b>30</b>	
<b>9. Name and Address of Current Registered Agent</b>			
<b>AMERES, GUS</b> <b>2594 12TH ST.</b> <b>SARASOTA FL 34237</b>			<b>81</b> Name <b>82</b> Street Address <b>83</b> <b>84</b> City
<b>11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation, officer or registered agent, or both, in the State of Florida. Such change was authorized by the corporation, agent, or both, and accepting obligations of, Section 607.0505, Florida Statutes.</b>			
<b>SIGNATURE</b>  <b>DIANE AMERES</b> <small>(NOTE: Registered Agent signature required)</small>			
<b>12. OFFICERS AND DIRECTORS</b>			
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<b>PRESIDENT</b> <b>AMERES, GUS</b> <b>2594 12TH ST</b> <b>SARASOTA, FL 34237</b>	<input type="checkbox"/> DELETE	<b>13.</b> <b>11 TITLE</b> <b>12 NAME</b> <b>13 STREET ADDRESS</b> <b>14 CITY-ST-ZIP</b>
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<b>VICE PRESIDENT</b> <b>AMERES, DIANE</b> <b>2594 12TH ST</b> <b>SARASOTA, FL 34237</b>	<input type="checkbox"/> DELETE	<b>21 TITLE</b> <b>22 NAME</b> <b>23 STREET ADDRESS</b> <b>24 CITY-ST-ZIP</b>
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		<input type="checkbox"/> DELETE	<b>31 TITLE</b> <b>32 NAME</b> <b>33 STREET ADDRESS</b> <b>34 CITY-ST-ZIP</b>
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		<input type="checkbox"/> DELETE	<b>41 TITLE</b> <b>42 NAME</b> <b>43 STREET ADDRESS</b> <b>44 CITY-ST-ZIP</b>
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		<input type="checkbox"/> DELETE	<b>51 TITLE</b> <b>52 NAME</b> <b>53 STREET ADDRESS</b> <b>54 CITY-ST-ZIP</b>
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		<input type="checkbox"/> DELETE	<b>61 TITLE</b> <b>62 NAME</b> <b>63 STREET ADDRESS</b> <b>64 CITY-ST-ZIP</b>
<b>14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated information indicated on this annual report or supplement. Annual report is true and accurate and that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report appears in Block 12 or Block 13 if changed, or on an attachment with an address.</b>			
<b>SIGNATURE:</b>  <b>DIANE AMERES</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			