

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

102

|   |   |  |
|---|---|--|
| PROFIT CORPORATION<br>ANNUAL REPORT<br>1997 |  | FLORIDA DEPARTMENT OF STATE<br>Sandra B. Mortham<br>Secretary of State<br>DIVISION OF CORPORATIONS |
|---|---|--|

DOCUMENT # P96000063073 (6)

1. Corporation Name  
SIBONEY CAFE, INC.

Principal Place of Business

3039 CORNELIA DRIVE  
JACKSONVILLE FL 32257

Mailing Address

3039 CORNELIA DRIVE  
JACKSONVILLE FL 32257

DO NOT WRITE IN THIS SPACE

|   |  |
|---|--|
| 3. Date Incorporated or Qualified<br>07/29/1986   | 3a. Date of Last Report                                |
| 4. FEI Number<br>59-3391989   | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired<br><input type="checkbox"/>  | \$8.75 Additional Fee Required                         |
| 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/>  | \$5.00 May Be Added to Fees                            |
| 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |  |

|   |  |
|---|--|
| 2. Principal Place of Business<br>21 2777-1 University Blvd. W.<br>Suite, Apt. #, etc.<br>22 City & State<br>Jacksonville, FL 32217<br>23 Zip<br>32217<br>24 Country<br>United States | 2a. Mailing Address<br>26 2777-1 University Blvd. W.<br>Suite, Apt. #, etc.<br>27 City & State<br>Jacksonville, FL<br>28 Zip<br>32217<br>29 Country<br>United States |
|---|--|

9. Name and Address of Current Registered Agent

BEARDSLEY, DALE A  
12 E BAY STREET  
JACKSONVILLE FL 32202-3427

10. Name and Address of New Registered Agent

|   |             |
|---|-------------|
| 81 Name   | 85 Zip Code |
| 82 Street Address (P.O. Box Number is Not Acceptable) |             |
| 83  |             |
| 84 City   | FL          |

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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

DATE

| 12. OFFICERS AND DIRECTORS |  | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |   |
|----------------------------|--|---|---|
| TITLE                      | D<br>FERNANDEZ, EULOGIO<br>3039 CORNELIA DR<br>JACKSONVILLE FL 32257 | 1.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |  | 1.2 NAME  |   |
| STREET ADDRESS             |  | 1.3 STREET ADDRESS                                    |   |
| CITY-ST-ZIP                |  | 1.4 CITY-ST-ZIP                                       |   |
| TITLE                      | D<br>FERNANDEZ, ZONIA<br>3039 CORNELIA DR<br>JACKSONVILLE FL 32257   | 2.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |  | 2.2 NAME  |   |
| STREET ADDRESS             |  | 2.3 STREET ADDRESS                                    |   |
| CITY-ST-ZIP                |  | 2.4 CITY-ST-ZIP                                       |   |
| TITLE                      | D<br>FERNANDEZ, ADOLFO<br>3039 CORNELIA DR<br>JACKSONVILLE FL 32257  | 3.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |  | 3.2 NAME  |   |
| STREET ADDRESS             |  | 3.3 STREET ADDRESS                                    |   |
| CITY-ST-ZIP                |  | 3.4 CITY-ST-ZIP                                       |   |
| TITLE                      |  | 4.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |  | 4.2 NAME  |   |
| STREET ADDRESS             |  | 4.3 STREET ADDRESS                                    |   |
| CITY-ST-ZIP                |  | 4.4 CITY-ST-ZIP                                       |   |
| TITLE                      |  | 5.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |  | 5.2 NAME  |   |
| STREET ADDRESS             |  | 5.3 STREET ADDRESS                                    |   |
| CITY-ST-ZIP                |  | 5.4 CITY-ST-ZIP                                       |   |
| TITLE                      |  | 6.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |  | 6.2 NAME  |   |
| STREET ADDRESS             |  | 6.3 STREET ADDRESS                                    |   |
| CITY-ST-ZIP                |  | 6.4 CITY-ST-ZIP                                       |   |

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]*

07-18-97

(607) 322-3200

CR2E034 (4/97)

FILED  
97 SEP -2 AM 9:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



**Shoney Cafe, Inc**

2012  
2777-1 University Boulevard, West  
Jacksonville, Florida 32217  
United States

Phone (904) 733-8300  
Fax (904) 733-5718

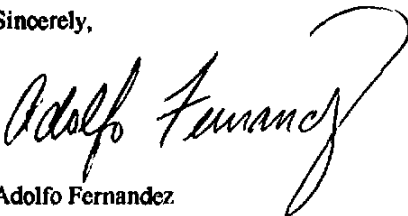
July 18, 1997

Florida Department of State  
P.O. Box 6327  
Tallahassee, Florida 32314

Dear Mrs. Sandra B. Mortham,

This letter is regarding the the issue of the 1997 Profit Corporation Annual Report Packet. We have just recently recieved our packet concerning the Annual Report and it has been brought to my attention that this is the second notice. According to our records we have never recieved a first notice. Being a first year company any information that would of been sent from the State of Florida is first priority. I placed a call to the telephone number that is palced in the packet, and one of the the customer service agents informed me to place this letter with the packet and a check for the amount of \$165.00. If there any other problems please contact me personally at (904) 733-8300, or at (904) 346-6355. Thank-you very much for your assistance in this matter.

Sincerely,



Adolfo Fernandez