NUL : JRAT JN LL BE JL LL RÄFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

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FILED PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sep 18 1997 8:00am Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT # P96000083066 (6) MAIN STEAK HOUSE, INC. Principal Place of Business Mailing Address 1981 MAIN STREET 69 SOUTH PALM AVENUE SARASOTA FL 34236 SARASOTA FL 34238 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 10/08/1996 2. Principal Place of Business 2a. Mailing Address Applied For 65-0<u>728043</u> 1991 SAME MAIN ST. Not Applicable Suite, Apt. #, etc. # 118 Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Regulred City & State City & State 6. Election Campaign Financing \$5.00 May Be FL. SARASOTA 23 Trust Fund Contribution 28 Added to Fees Country Zip intry 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. XYes Xoo No 34236 USA 25 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MARK A. CARAGINIO AMERILAWYER CHARTERED 343 ALMERIA AVENUE Street Address (P.O. Box Number is Not Acceptable) 82 CORAL GABLES FL 33134 83 84 City SARHSON A Zip Code 34236 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) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change 1.1 31TLE TITLE CARAGIULO, MARK A NAME 1.2 NAME 1981 MAIN STREET STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL 34236 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition Change TITLE 2.1 TITLE CARAGIULO, JOHN F NAME 22 NAME 1981 MAIN STREET STREET ADDRESS 2.3 STREET ADDRESS SARASOTA FL 34236 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE CARAGIULO, ANTHONY M NAME 3.2 NAME 1981 MAIN STREET STREET ADDRESS 3.3 STREET ADDRESS SARASOTA FL 34236 CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 THILE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CHTY-ST-ZIP CITY-ST-ZIP DELETE Change Adc ition 6.1 TITLE TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filling 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 trusted 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.