SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

P97000012706 (2)

DURANGO STEAKHOUSE OF BOCA RATON, INC.

FILED Sep 28 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address		
·	•		
2325 ULMERTON ROAD STE 20 CLEARWATER FL 34622	2325 ULMERTON ROAD STE CLEARWATER FL 34622	: 20	DO NOT WEITE MI TIME OF LOS
			DO NOT WRITE IN THIS \$PACE
			3. Date Incorporated or Qualified
2. Principal Place of Business	De Mailine Address		02/07/1997 4. FEI Number Applied For
 			50 2010 1/7/
Puito Apt # oto	[26]		39-392 9 163 Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing \$5.00 May Be
23	28		Trust Fund Contribution Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 25		30	Personal Property Tax due June 30. Yes No
9. Name and Address of C		******************************	10. Name and Address of New Registered Agent
DARK-PRIMARE H		81 Name	
2245-HISERETAN - 972-20	•		sony D. MORAIS
ANTARWATER DE 04000		82 Street Add	dress (P.O. Box Number is Not Acceptable) 2325 ULMER TON RO
		83	
			417E 20 33742
		84 City	85 Zip Code
41 Durayant to the provisions of continue 60	7 BERT and COT 1500 Florido Statutos	the above period ear	coration submits this statement for the purpose of changing its registered
office or registered agent, or both, in the	State of Florida, Such change was au	thorized by the corpora	tion's board of directors. I hereby accept the appointment as registered
agent. I am familiar with, and accept the	obligations of, section 607.0505, Flori	ida Statutes.	21100
SIGNATURE JET TUM			7/13/98
Signature, typed or printed name of register 12. OF FICER	RS AND DIRECTORS	E: Registered Agent signature re	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE SEE	DELETE	11 TOTALE T	Change Change
NAME	[] DETELE	LONGE G	INO B BULLARY, VA
STREET ADDRESS		1.3 STREET ADDRESS	JLY WIMERIN RO SWITE TO
			LETRICHATEL 6 33762
CITY-ST-ZIP TITLE	Delete	2 1 TITLE	LETREWATER, & 33762 Change Addition
NAME	[,] DELETE	22 NAME	METHAL D MODELS
ļ.		2.3 STREET ADDRESS 2	MEGORY D MORRIS 325 ULMENTON RO SUITE 20
STREET ADDRESS		"	
CITY-ST-ZIP		2.4 CITY-S1-ZIP C	LETARWATER, FLA 33762
TITLE	L] DELETE	3.1 TITLE 3.2 NAME.	L_J Change L_J Addition
NAME			
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP	- · · · · · · · · · · · · · · · · · · ·	3.4 CITY-ST-ZIP	
TITLE	L. J DELETE	4.1 TITLE	Change Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	L_ DELETE	5.1 TITLE	Change Addition
NAME		5.2 NAME	400002650534
STREET ADDRESS		5.3 STREET ADDRESS	-03/28/9801118 00 5
CITY-ST-ZIP		5.4 CITY-ST-ZIP	***550.00
TITLE	DELETE	6.1 TITLE	Change Addition
NAME		6.2 NAME	\ \^ \\\
STREET ADDRESS		6.3 STREET ADDRESS	10,4
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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 AS MON

dirky

912-576-6424

(2E034 (5/98)