

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 06, 1999 8:00 am  
Secretary of State

05-06-1999 90202 007 \*\*\*150.00

DOCUMENT # P97000013595

1. Corporation Name  
TIJUANA FLATS INCORPORATED

Principal Place of Business  
444 S HINT CLUB BLVD  
APOPKA FL 32703

Mailing Address  
2431 ALOMA AVE  
SUITE 246  
WINTER PARK FL 32792

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/10/1997

4. FEI Number  
59-3426895

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WHEELER, BRIAN J  
1658 MAJESTIC OAK DR  
APOPKA FL 32712

Change address →

81 Name Brian J. Wheeler  
82 Street Address (P.O. Box Number is Not Acceptable)  
1500 Hibiscus Ave  
83 Winter Park, FL  
84 City FL 85 Zip Code 32789

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

4/29/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE  
NAME WHEELER, BRIAN J  
STREET ADDRESS 70 BATTLER STREET  
CITY-ST-ZIP ORLANDO FL 32828

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS 1500 Hibiscus Ave  
1.4 CITY-ST-ZIP Winter Park, FL 32789

TITLE D ☒ DELETE  
NAME FLORES, SCOTT  
STREET ADDRESS 70 BATTLER STREET  
CITY-ST-ZIP ORLANDO FL 32828

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME WHEELER, CHESTER F  
STREET ADDRESS 70 BATTLER STREET  
CITY-ST-ZIP ORLANDO FL 32828

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME WHEELER, RACHEL  
STREET ADDRESS 1658 MAJESTIC OAK DR  
CITY-ST-ZIP APOPKA FL 32712

4.1 TITLE ☒ Change ☐ Addition  
4.2 NAME Wheeler, Rachel  
4.3 STREET ADDRESS 1500 Hibiscus Ave  
4.4 CITY-ST-ZIP Winter Park, FL 32789

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/99

Date

407-339-2222

Daytime Phone #

CR2E034 (11/98)