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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000038219 (6)

LET'S EAT OUT, INC.

FILED Feb 27 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 232 & 234 BREVARD AVE. 232 8 234 BREVARD AVE. **COCOA FL 32922 COCOA FL 32922** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/29/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zø Country 8. This corporation owes or has paid the current year intangible 24 ☐ Yes Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SOILEAU, JOHN L 1970 MICHIGAN AVE., BLDG. C Street Address (P.O. Box Number is Not Acceptable) COCOA FL 32922 83 85 Zip Code 64 City 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. Thereby 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 repowers) agent met true if applicable (NOTE: Registered Agent signature required when re-instating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. TITLE DELETE 1.1 TITLE Change ■ Addition ROSS, DIANE A NAME 1.2 NAME 232 & 234 BREVARD AVE. 1.3 STREET ADDRESS STREET ADDRESS COCOA FL 32922 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 21 TITLE Change Addition TITLE DECORO, PATRICIA M NAME 2.2 NAME 232 & 234 BREVARD AVE. STREET ADDRESS 2.3 STREET ADDRESS **COCOA FL 32922** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADORESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE 4 1 TITLE Change Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST-ZIP DELETE Addition Change TITLE 5.1 TOLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE 6.2 NAME MAKAF STREET ADDRESS 6.3 STREET ADDRESS 6.4 City - ST - ZIP

14. Thereby 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 hemiged, or on an attackment with an address.

SIGNATURE

d X

DIANE AIROSS

1-08-98 (407)635-9032

CR2E034 (10/97)