2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P97000042927

1. Entity Name

DSS RESTAURANT MANAGEMENT, INC.



FILED Feb 07, 2008 8:00 am Secretary of State 02-07-2008 90021 010 ***150.00

Principal Place of Business		Mailing Address							
728 CASA LOMA BLVD BOYNTON BEACH FL 33435		728 CASA LOMA BLVD BOYNTON BEACH FL 33435		. ,					
2. Principal Place of Business - No P.C. Box #		3. Mailing Address						5115 115H 188	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			1st MOORE CR2E034 (10/07)				
City & State		City & State			4. FEI Numb	oer 65-075572	3	<u> </u>	plied For t Applicable
Zıp	Country	Zip	Country					8.75 Additional ee Required	
	6. Name and Address of Current	Registered Agent			7. Name an	d Address of New F	Registered Ager	nt	
			Namo		•		-		
C/C	AGGS, WILLILAM TWO GEORGES CASA LOMA BLVD		Street Ac	Street Address (P.O. Box Number is Not Acceptable)					
	YNTON BEACH FL 33435		City				FL	Zip Code	e
8 The anove	named entity submits this statement for	r the purpose of changing its ri	enistered office or	register	ed agen: or re	ntin the State of El		liar with	and accept
	tions of registered agent,	the paroose or changing its in	egistered diffice of	register	ed agent, or or	nn, in the State of th	onta. Fallifalli	nai witii,	and accept
DICENTURE	in the second								
SIGNATURE	Signature, typed or printed name of registered insent.	and site Lampicanio. MOTE	Registered Agent signatu	ne required	when reinstate g)	•	DATE		
After	ILE NOW!!! FEE IS \$150.00 May 1, 2008 Fee Will Be \$550.00 k Payable to Florida Department of	Jagaga Ellard Jadaga Ellard				9. Election Camp Trust Fund Cor			00 May Be d to Fees
10.	OFFICERS AND	DIRECTORS ,	11.		ADDITIONS	L CHANGES TO OFF	FICERS AND DIF	RECTORS	5 IN 11
TITLE	D	☑ Delete	TITLE	,				Change	Addition
NAME	SCAGGS, WJ J R		NAME						
STREET ADDRESS CITY-ST-ZIP	1520 ROYAL PALM WAY BOCA RATON FL 33431		STREET ADDRESS CITY-ST-ZIP						
TITLE	D		1					Change	- Ladica
NAME	SCAGGS, STEVEN M	☐ Delete	TITLE	D Silan	M S.		U	Change	☐ Addition
STREET ADDRESS	16820 ETHELWOOD TERRACE		STREET ADORESS	206	Thatch	laggs Palm Dr			
CITY-ST-ZIP	OLNEY MD 20832		CITY-ST-ZIP	Boca	- Raton	FL 334	3.7		
TOLE		☐ Delete	TITLE					Change	Addition
NAME			HAME	_	~				
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP						
TITLE -		☐ Delete	TITLE					Change	☐ Addition
NAME		L. Detet	NAME					Onange	☐ Wootton
STREET ADDRESS			STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP						
TITLE		☐ D el ete	TITLE					Change	☐ Addition
NAME STREET ANDRESS			NAME CIRCLE ADDRESS						
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP						
TITLE		☐ Delete	TITLE					Change	Addition
NAME		□ Delete	NAME					unanye	CT VOURDII
STREET ADDRESS	!		STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with 3n address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/08 561-736-2717