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

2a, Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

28

29

PROFIT CORPORATION ANNUAL REPORT

1998

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

24

Zip



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000045598 (4)

KEY WEST TACO COMPANY, INC.

Principal Place of Business Mailing Address 8 MINUTEMAN CAUSEWAY **8 MINUTEMAN CAUSEWAY** COCOA BEACH FL 32931 COCOA BEACH FL 32931

9. Name and Address of Current Registered Agent

Country

25

VANBUREN, DAVID S **8 MINUTEMAN CAUSEWAY** 

COCOA BEACH FL 32931

## **FILED** Jan 16 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/22/1997 FEI Number

8. This corporation owes or has paid the current year Intangible

**345**7070

Name and Address of New Registered Agent

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

Trust Fund Contribution

Street Address (P.O. Box Number is Not Acceptable)

Applied For

\$8.75 Additional

Fee Required

**\$5.00** May Be

Added to Fees

☐ Yes

1/8/98 (407) 783-6850

Not Applicable

									-
			84	City		FL	85 Z	p Code	
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									
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGE	S TO OFFICERS AND	DIRECT	ORS IN 12	
TITLE	PTD	DELETE	1.1 TITLE				Chang	e 🔲 Ad	dition
NAME	VANBUREN, DAVID		1.2 NAME						
STREET ADDRESS	8 MINUTEMAN CAUSEWAY		1.3 STREET	ADDRESS					18
CITY-ST-Z#P	COCOA BEACH FL 32931		1.4 CITY - S	r-zip					
TITLE	VSD	☐ DELETE	2.1 TITLE				Chang	e ∐ Ac	dition
NAME (	COST, PETER		2.2 NAME	- 1					
STREET ADDRESS	8 MINUTEMAN CAUSEWAY		2.3 STREET	ADDRESS					
CITY-ST-ZIP	COCOA BEACH FL 32931		2. 4 CITY-S	T-ZIP					
TITLE		☐ DELETE	3.1 TITLE			L	Chang	e ∐LAd	ddition
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STREET ADDRESS			3.3 STREET	ADDRESS					
CITY - ST - ZIP			3.4. CITY - S	T-ZIP					
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NAME			4. 2 NAME						1
STREET ADDRESS			4.3 STREET	ADDRESS					
Crty-St-ZIP			4.4 CITY-S	r-zip					
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STREET ADDRESS			5 3 STREET	ADDRESS					
CITY-ST-ZIP			5.4 CITY - S	Γ-ZIP	<u> </u>				
TITLE		DELETE	6.1 TITLE				Change	e 🔲 Ad	dition
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET	ADDRESS					
CITY - ST - ZIP			6.4 CITY-S			<del> </del>			
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.									

David S. Van Berren

Country

81

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