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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000054309

FILED Jun 25, 1999 8:00 am Secretary of State

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| 1. Corporation | Name | 797000 0 | JO43 | $\omega_{\mathcal{V}}$ | | | - | | | | | | |
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| TACO CALIENTE, INC. | | | | | | | | _ | | | | | |
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| Principal Place | e of Business | ··· | Mailing | Address | | | | l illi | | BE() BE()(46 | 111 111111 1111111 | Bitti Bibbb titt | |
| 1361 AIRPORT | ORTH | | } | | | | | | | | | | |
| 1361 AIRPORT ROAD, NORTH NAPLES FL 34104 NAPLES FL 34104 | | | | | | | | | | NOTINDE | T" IN THE | CDACE | |
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| 0 0 0 0 0 0 0 | land of Divolution | | 2n Mai | lina Addrass | | | | 06/19/ | her | | | | pplied For |
| | lace of Business | | | ling Address | - 3 | E. Tamir | m: to | EO-346 | 2072 | | | <u> </u> | lot Applicat |
| 21 2626 Suite, Apt. | | Amiami | 26 Suit | te, Apt. #, etc. | | ** 10 \$ 700 \$ 20. | - 1 | | | | | | Additional |
| 22 | #, ClC. | | 27 | .0[7,4=1.7] | | | ! | Certifcat | e of Status | Desired | | • | Required |
| City & State City & State | | | | | | | | 6. Election | Campaign | inancing | | \$5.00 | May Be |
| 23 NAMES 28 NAPLES | | | | | | | | | nd Contribu | | | | to Fees |
| Zip | | ountry | Zip | | Co | ountry | | 8. This cor | poration ow | es the curr | ent year In | tangible | |
| 24 341 | 12 25 | Con USA | 29 3 | 74112 | 30 | USB | | | l Property T | | | Yes | DNG |
| | 9. Name and A | Address of Current | Registere | d Agent | | | 1 | Ø. Name a | nd Address | of New F | Registered | Agent | |
| | | | | | | 81 Name | | | | | | | |
| | dito, Joseph I | | | | | 82 Street | Address | (P.O. Box | Jumber is N | ot Accepta | able) - | | |
| | _AIRPORT ROAL | D, NORTH ~ | | | | 26. | | 3 6 | | (A) | * | 13 | |
| ~NAP I | LES FL 34104 | | | | | 83 | | | • | | | | |
| في ا | · | | | | | 84 City | | | | | | 85 Zip | Code |
|). | | | | | | | UMP | les | | | <u>F</u> | - 3 | 4112 |
| 11. Pursuant | to the provisions o | f Sections 607.0502 both, in the State of | and 607.1 | 508, Florida Sta | tutes, the | above-named | corporati | ion submits | this statem | ent for the | purpose of | changing it | s registered |
| office or n agent. La | egistered agent, or m familj an with, an | d accept the obligation | ns of, Sec | tion 607.0505 | Lorida-St | ed by the corp atutes. | orations | Doald of di | iectora. i ne | COY GOOG | or the appe | 1 1. | _ |
| SIGNATURE | | < ('~ | | | | | | | | | 41 | 29/9 | 9 |
| | Signature typed or printe | ed name of registered agent a | | | | ed Agent signature | required whe | | NOIGHANG | -0. TO OF | DATE | UD DIDECT | ODC IN 12 |
| 12. | <u> </u> | OFFICERS AND | DIRECTO | DELETE | 13 | TITLE | | | NS/CHANG | | | Change | |
| TITLE | D |) | | C) OFFEIG | | | 26 | 2/ - 3 | E. | Tami | am' - | Tree | |
| NAME CANDITO, JOSEPH P JR. | | | | | | NAME STREET ADDRESS | | | | | | | |
| STREET ADDRESS -1961 AIRPORT ROAD, NORTH CITY-ST-ZIP NAPLES FL 34104 | | | | | | | NA | oles | FL | 74 | 1112 | | |
| CITY-ST-ZIP | | 101 | | [] DELETE | | CITY-ST-ZIP | ├ ' | | ! | | | Change | Additi |
| TITLE | D | | | C3 DELETE | | NAME | | | | | | | _ |
| NAME | ENNIS, PETER | | | | | STREET ADDRESS | | | | | | | |
| { | TREET ADDRESS 27967 TEMPLE TERRACE TTY-ST-ZIP BONITA SPRINGS FL 34135 | | | | | | | | | | | | |
| CITY-ST-ZIP TITLE | D DIVINA SPRIN | IGO FL 34133 | | DELETE | | CITY-ST-ZIP TITLE | | | | | | Change | Additis |
| | SCHONDER, R | NCHADD. | | | | NAME | | | ~~·· | - | _ | | - |
| NAME STREET ADDRESS | 27967 TEMPLE | | | | | STREET ADDRESS | | | | | | | |
| | BONITA SPRIN | | | | | CITY-ST-ZIP | | | | | | | |
| TITLE | JOHNA OI AIN | (JO 1 L 07100 | · · · · · · · · · · · · · · · · · · · | DELETE | | TITLE | | | | | | Change | Additio |
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| STREET ADDRESS | ' | | | | 5.3 | STREET ADDRESS | | | | | | | |
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| TITLE | | | | ☐ DELETE | 6.1 | TITLE | T | - <u>-</u> | | | | ☐ Change | Additio |
| NAME | | | | | 6.2 | NAME | 1 | | | | | | |
| STREET ADDRESS | | | | | 6.3 | STREET ADORESS | ļ | | | | | | |
| CITY-ST-ZIP | <u>}</u> | | | | 6.4 | CITY-ST-ZIP | | | | | | | |
| | ortify that the infor | mation supplied with | this filing | does not qualify | | | d in Secti | ion 119 07(| 3)(i) Florida | Statutes. | l further ce | rtify that the | information |

1. I hereby certify that the information supplied with this tilting does not quality for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the informatic 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 emported to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an attachment with an addiese, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF STORNING OFFICER OR DIRECTOR

4/29/99 (941) 4178