## 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

## DOCUMENT # P97000055724

PLANTATION RESTAURANT, INC.

Principal Place of Business

Mailing Address

7951 SW 6TH ST., STE. 112 PLANTATION FL 33324

7951 SW 6TH ST., STE, 112 PLANTATION FL 33324

## **FILED** May 10, 1999 8:00 am Secretary of State

05-10-1999 90203 021 \*\*\*150.00

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DO NOT WRITE IN THIS SPACE

					3. Date Incorporated or Qualifed 06/24/1997		
0 03 7 10	In the second se	2a, Mailing Address			4. FEI Number	Applied For	
<b>─</b>	lace of Business	<u> </u>			65-0766427	Not Applicable	
21 Suite Ant	# 010	Suite, Apt. #, etc.			<u> </u>	3.75 Additional	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired	Fee Required	
City & State City & State					' " "   1	<b>5.00</b> May Be	
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Count	у	8. This corporation owes the current year Intangit		
24	25	29 30	)		Personal Property Tax.		
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Ager	<u>t                                      </u>	
			8	1 Nam	ne		
CORPORATION SERVICE COMPANY				2 Stree	et Address (P.O. Box Number is Not Acceptable)		
1201 HAYS STREET TALLAHASSEE FL 32301-2525				82 Street Address (P.O. Box Number is Not Acceptable)			
				3	<del></del> ;		
ļ			L	<u> </u>		7: 0:1:	
			8	4 City	FL  85	Zip Code	
44 D	to the provisions of Scotions 607 0502	and 607 1508 Florida Statutes	the abo	ve-name	ed corporation submits this statement for the purpose of chan	ging its registered	
office or re	egistered agent, or both, in the State of manifer with, and accept the obligation	of Florida. Such change was auth	norized b	y the co	rporation's board of directors. I hereby accept the appointme	nt as registered	
SIGNATURE	· · · · · · · · · · · · · · · · · · ·				ra required when reinstation. DATE		
	Signature, typed or printed name of registered agent		13.	em signatu	re required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DI	RECTORS IN 12	
12.			1.1 TITLE			Change Addit	
πιε	_						
NAME !	MCDONALD, GERALD T		1.2 NAME				
STREET ADDRESS	161 NW 127TH AVE.			ET ADORES	SS		
CITY-ST-ZIP	PLANTATION FL 33325		14 CITY		<u> </u>	Change	
TITLE		☐ DELETE	2.1 TITLE			Change	
NAME			2.2 NAM				
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STREET ADDRESS			•		30		
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NAME		!	6.2 NAM				
STREET ADDRESS				ET ADDRE	SS		
CITY-ST-ZIP	j		6.4 CITY	ST-ZIP			

14. 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:

CITY-ST-ZIP

rie 26, 1999

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