

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

FILED
Aug 17 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000057230 (9)

1. Corporation Name

PAPINE'S PLACE TAKE-OUT RESTAURANT, INC.



Principal Place of Business

91 SW 40TH AVE
PLANTATION FL 33317

Mailing Address

91 SW 40TH AVE
PLANTATION FL 33317

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/30/1997

4. FEI Number

05-0760236

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21 91 SW 40th Ave
Suite, Apt. #, etc.

2a. Mailing Address

26 91 SW 40th Ave
Suite, Apt. #, etc.

22 City & State

23 Plantation Fla

24 Zip

33317

Country

25 Broward

27 City & State

28 Plantation Fla

29 Zip

33317

Country

30 Broward

9. Name and Address of Current Registered Agent

ROYES, ROYES
91 SW 40TH AVE
PLANTATION FL 33317

10. Name and Address of New Registered Agent

81 Name

Muriel Royes

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

2041 NW 28th Terrace

Fort Lauderdale

83 City

Fort Lauderdale

FL

85 Zip Code

33311

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, type or printed name of registered agent and, if not applicable, (NOTE: Registered Agent signature required when reinstating)

DATE

4/27/98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD ROYES, MURIEL

STREET ADDRESS 2041 NW 28TH TERR

CITY-ST-ZIP PLANTATION FL 33311

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME President

1.3 STREET ADDRESS Muriel Royes

1.4 CITY-ST-ZIP 2041 NW 28th Terrace

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME Fort Lauderdale, Fla 33311

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 recorder 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.

SIGNATURE: Muriel Royes 4/27/98 954

CR2E034 (10/97)