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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000060144 (7)

AGUSTIN'S RESTAURANT AND MARKET, INC.

## **FILED** Apr 03 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address				
711 COQUINA	WAY	711 COQUINA WAY				
BOCA RATON FL 33432		BOCA RATON FL 33432			DO NOT WRITE IN THIS SPACE	
•					3. Date Incorporated or Qualified	
	•				07/10/1997	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For	
					Not Applicable	
Suite, Apt. W. etc.		Suite, Apt. #, etc.			\$8.75 Additional	
22			27		5. Certificate of Status Desired Fee Required	
City & State			City & State		Election Campaign Financing \$5.00 May Be	
23			28		Trust Fund Contribution Added to Fees	
Zip Country			Zip Country		This corporation owes or has paid the current year Intangible	
24	<del> </del>	25 29 30		-	Personal Property Tax due June 30. Yes No	
	g. Name and Address of Curre		1001		10. Name and Address of New Registered Agent	
CH			81	Name	9	
SMITH, PETER B 190 W. PALMETTO PARK RD.			_	1	(20.0)	
			82 Street Ad		t Address (P.O. Box Number is Not Acceptable)	
BO	CA RATON FL 33432		8:	<del> </del>	A CONTRACTOR OF THE CONTRACTOR	
			84	City	FL 85 Zip Code	
	to discount Continue CO7 DE	00 and 007 1500 Florida Ctati	too the abov	io nomad	d personation authority this statement for the purpose of changing its registered	
office or r	egistered agent, or both, in the State	e of Florida. Such change was	authorized b	y the con	or corporation's sound of directors. I hereby accept the appointment as registered	
agent. I a	m familiar with, and accept the oblig	gations of, Section 607.0505, F	lorida Statute	es.		
SIGNATURE					D. A. P.	
	Signature, typed or printed name of registered ag	<u> </u>		gent signature	rice required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.		ND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	0				C cuange D Acquion	
NAME	BARCHUK, AGUSTIN B		1.2 NAME			
STREET ADDRESS	• • • • • • • • • • • • • • • • • • • •		1.3 STAE	T ADDRESS		
City-St-ZIP			1.4 CiTY-		Date:	
TITLE	DELETE 2.1		2.1 TITLE		Change Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREE	T ADDRESS		
CITY-ST-ZIP			2. 4 CITY	-ST-ZIP		
TITLE	DELETE		3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY-ST-ZIP			3.4. CITY	- ST - ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAM	E		
STREET ADDRESS			4.3 STREI	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-			
TITLE		DELETE	5.1 TITLE		5000024776\$\$\text{siange \( \text{\texi}\text{\text{\text{\text{\texi}\text{\texi}\text{\text{\text{\texi}\text{\text{\texi}\text{\text{\texi}\t	
NAME		<u></u>	5.2 NAME		-04/03/9801011017 W	
				T ADDRESS	017000000000000000000000000000000000000	
STREET ADDRESS					· ****100,00 4.つ	
CITY-ST-ZIP		DELETE	5.4 CITY - 6.1 TITLE		Change Addition	
TITLE		Fi prerit				
NAME			6.2 NAME			
STREET ADDRESS				T ADDRESS	5	
CITY-ST-ZIP		St. ich Bu. D	6.4 CITY		ated in Section 119.07(3)(i), Florida Statutes, I further certify that the information	
4.4 Iberahva	namus anitematica att the internation supplied	with this tiling <b>yo</b> oes not guelity.	TOT THE EXEM	DMOD SIAL	aeo in secilor i 19.073301, riolida sialutes, ) turinei certiiv that the intoffnation	

Indicated on this annual report or supplied with this himing view not quality for the exempting stated in Section 119.07(3)(I). Florida Statutes, I further certify that the informatic indicated on this annual report is reported by the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee expowered to execute this report is required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an altabliment with an address.