## 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 Apr 17 1998 8:00am

Secretary of State

DOCUMENT #

P97000060907 (7)

| T F CAVA, INC.                                                       |                        |                                                                                                                |                                   |                                     |                   |                     |                                  |                                                                                                         |                  |                                          |                        |
|----------------------------------------------------------------------|------------------------|----------------------------------------------------------------------------------------------------------------|-----------------------------------|-------------------------------------|-------------------|---------------------|----------------------------------|---------------------------------------------------------------------------------------------------------|------------------|------------------------------------------|------------------------|
|                                                                      |                        |                                                                                                                |                                   |                                     |                   |                     |                                  | I I <b>li</b> aniem ind Ibnin i <b>ne</b> n <b>de</b> nn enka                                           |                  | <b>46). Boub</b> ( <b>B</b> 10) <i>(</i> | <b>41</b> 01 (14) (14) |
| Principal Plac                                                       | o of Busines           | P                                                                                                              | Moil                              | ing Addross                         |                   |                     |                                  |                                                                                                         |                  |                                          |                        |
| Principal Place of Business 2375 NW 122ND DRIVE                      |                        |                                                                                                                |                                   | Maiting Address 2375 NW 122ND DRIVE |                   |                     |                                  |                                                                                                         |                  |                                          |                        |
| CORAL SPRINGS FL 33365                                               |                        |                                                                                                                |                                   | CORAL SPRINGS FL 33365              |                   |                     |                                  |                                                                                                         |                  |                                          |                        |
|                                                                      |                        |                                                                                                                |                                   |                                     |                   |                     |                                  | DO NOT WRITE                                                                                            | . IN THIS S      | SPACE                                    |                        |
|                                                                      |                        |                                                                                                                |                                   |                                     |                   |                     |                                  | 3. Date Incorporated or Qualified                                                                       |                  |                                          |                        |
| 2. Principal Place of Business                                       |                        |                                                                                                                |                                   | 2a. Mailing Address                 |                   |                     |                                  | 07/11/1997<br>4. FEI Number                                                                             |                  | T                                        | oplied For             |
| 21                                                                   |                        |                                                                                                                | 26                                | 26                                  |                   |                     |                                  | 65-0763241                                                                                              |                  | <del> </del>                             | ot Applicable          |
| Suite, Apt. #, etc.                                                  |                        |                                                                                                                | 5                                 | Suite, Apt. #, etc.                 |                   |                     | 5. Certificate of Status Desired |                                                                                                         | \$8.75           | Additional                               |                        |
| 22                                                                   |                        |                                                                                                                |                                   | [27]                                |                   |                     | 5. Commedic of Status Desired    | <u> </u>                                                                                                | Fee Re           | equired                                  |                        |
| City & State                                                         |                        |                                                                                                                |                                   | City & State                        |                   |                     | 6. Election Campaign Financing   |                                                                                                         |                  | May Be                                   |                        |
| Zip Country                                                          |                        |                                                                                                                |                                   | Zip Country                         |                   |                     |                                  | Trust Fund Contribution Added to Fees  8. This corporation owes or has paid the current year Intangible |                  |                                          |                        |
| 24                                                                   | 25                     |                                                                                                                | 29                                | 29                                  |                   | 30                  |                                  | Personal Property Tax due June 30. Yes No                                                               |                  |                                          |                        |
|                                                                      | g. Name                | and Address of Cur                                                                                             | rent Registe                      | red Agent                           |                   |                     |                                  | 10. Name and Address of New Re                                                                          | gistered /       | \gent                                    |                        |
|                                                                      | DORE F                 |                                                                                                                |                                   | 6                                   | Name              |                     |                                  |                                                                                                         |                  |                                          |                        |
| 2375 NW 122ND DRIVE                                                  |                        |                                                                                                                |                                   |                                     |                   | 2 Street            | Addres                           | ss (P.O. Box Number is Not Acceptat                                                                     | ole)             | d                                        |                        |
| CORAL SPRINGS FL 33365                                               |                        |                                                                                                                |                                   |                                     |                   | 13                  | 40                               | 5 Kensing-                                                                                              | $\omega \sigma$  |                                          | <u>-</u>               |
|                                                                      |                        |                                                                                                                |                                   |                                     | 1                 | 4 Gity              |                                  |                                                                                                         |                  |                                          |                        |
|                                                                      |                        |                                                                                                                |                                   |                                     |                   |                     | ca 1                             | Springs                                                                                                 | FL               | 85 Zip (                                 | Code<br>076            |
| 11. Pursuant                                                         | to the provis          | ions of Sections 607.0                                                                                         | 0502 and 607                      | 1508, Florida Statu                 | tes, the abo      | ove-named           | corpor                           | ration submits this slatement for the p<br>n's board of directors. I hereby accep                       | urpose of        | changing it                              | s registered           |
| agent. La                                                            | am <b>fa</b> miliar wi | th, and accept the ob                                                                                          | atti or Honoa<br>lligations of, S | Section 607.05 <b>05,</b> F         | lorida Statul     | by the corp<br>les. | poratio                          | n's board of directors, i hereby accep                                                                  | of the appo      | Sintment as                              | registered             |
| SIGNATURE                                                            | D(                     | entranta de la composición de la compo |                                   |                                     |                   |                     |                                  |                                                                                                         |                  |                                          |                        |
| Signature, typed or planted name of registered age  12. OFFICERS ANI |                        |                                                                                                                |                                   |                                     |                   |                     | : гедыеа                         | when roinstaling) ADDITIONS/CHANGES TO OFFICE                                                           | DATE<br>CERS AND | DIBECTOR                                 | S IN 12                |
| TITLE                                                                | D                      |                                                                                                                | '                                 | ☐ DELET <b>E</b>                    | 1.1 101           | <u> </u>            |                                  | ASSETT CHOICE IN MICEOUT CONTINUES                                                                      |                  | Change                                   | Addition               |
| NAME                                                                 | CAVA, THEODORE F       |                                                                                                                |                                   | 1.2 NAME                            |                   | l                   |                                  | _                                                                                                       |                  |                                          |                        |
| STREET ADDRESS 2375 NW 122ND DRIVE                                   |                        |                                                                                                                |                                   | 1.3 STHEET ADDRESS                  |                   | 49                  | 05 Kensing to                    | $\mathfrak{O}_{i}$ $\mathbb{C}_{i}$                                                                     | H.               |                                          |                        |
| CITY-ST-ZIP                                                          |                        |                                                                                                                |                                   | Decem                               | 1.4 CITY-ST-ZIP C |                     | Co                               | 05 Kensing to                                                                                           | <u> </u>         | <u>:330</u>                              | 76                     |
| TITLE<br>NAME                                                        |                        |                                                                                                                |                                   | <b>.</b>                            |                   |                     |                                  | , ,                                                                                                     |                  | Change                                   | Addition               |
| STREET ADDRESS                                                       |                        |                                                                                                                |                                   |                                     | 2.2 NAM           | et address          |                                  |                                                                                                         |                  |                                          | }                      |
| CITY-ST-ZIP                                                          |                        |                                                                                                                |                                   |                                     |                   | (-S1-ZIP            |                                  |                                                                                                         |                  |                                          | İ                      |
| TITLE                                                                | <del></del>            |                                                                                                                |                                   | ☐ DELETE                            | 3.1 11111         |                     |                                  |                                                                                                         |                  | Change                                   | Addition               |
| NAME                                                                 |                        |                                                                                                                |                                   |                                     | 3.2 NAM           | E                   |                                  |                                                                                                         |                  |                                          |                        |
| STREET ADDRESS                                                       |                        |                                                                                                                |                                   |                                     | 3 3 STRE          | et address          |                                  |                                                                                                         |                  |                                          | :                      |
| CITY-ST-ZIP                                                          | <u> </u>               |                                                                                                                |                                   | DELETE                              |                   | '-ST-7IP            |                                  |                                                                                                         |                  |                                          |                        |
| TITLE<br>Name                                                        |                        |                                                                                                                |                                   | DELETÉ                              | 4.1 1014          |                     |                                  |                                                                                                         | '                | Change                                   | Addition               |
| STREET ADDRESS                                                       |                        |                                                                                                                |                                   |                                     | 4. 2 NAN          | E1 ADDRESS          |                                  |                                                                                                         |                  |                                          | ļ                      |
| CITY+ST-ZIP                                                          |                        |                                                                                                                |                                   |                                     | 4.4 Cily          |                     |                                  |                                                                                                         |                  |                                          |                        |
| TITLE                                                                |                        |                                                                                                                |                                   | DOLLETE                             | 5.1 1/118         |                     |                                  |                                                                                                         | 1                | Change                                   | Addition               |
| NAME                                                                 |                        |                                                                                                                |                                   |                                     | 5.2 NAM           | E                   |                                  |                                                                                                         |                  | -                                        |                        |
| STREET ADDRESS                                                       |                        |                                                                                                                |                                   |                                     | 5.3 STRE          | ET ADDRESS          |                                  |                                                                                                         |                  |                                          | ļ                      |
| CITY-ST-ZIP                                                          |                        |                                                                                                                |                                   |                                     | 5.4 CITY          |                     |                                  |                                                                                                         | <del></del>      |                                          |                        |
| TITLE                                                                |                        |                                                                                                                |                                   | DELETE                              | 6.1 TITLE         |                     |                                  |                                                                                                         | ļ.               | Change                                   | Addition               |
| NAME<br>CTREET ADDRESS                                               |                        |                                                                                                                |                                   |                                     | 6.2 NAM           |                     |                                  |                                                                                                         |                  |                                          |                        |
| STREET ADDRESS                                                       |                        |                                                                                                                |                                   |                                     | 6 3 S1RE          | ET ADDRESS          |                                  |                                                                                                         |                  |                                          |                        |

14. Thereby 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, for on 3/1 itactingoit with an address.