2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empower@d.

SIGNATURE:

FILED Apr 21, 2000 8:00 am Secretary of State DOCUMENT # **P97000061425** GDS RESTAURANT ENTERPRISES, INC. 04-21-2000 90101 040 ***150.00 Principal Place of Business Mailing Address 4141 BAYVIEW DR. 4141 BAYVIEW DR. FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308-5809 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0771745 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name TEBOUL, STEPHAN S Street Address (P.O. Box Number is Not Acceptable) 4141 BAYVIEW DR. FT. LAUDERDALE FL 33308 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition Change TITLE ☐ Delete TEBOUL, STEPHAN S NAME STREET ADDRESS 4141 BAYVIEW DR. STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP FT. LAUDERDALE FL 33308 ☐ Addition ☐ Change TITLE ☐ Delete TITLE TEBOUL, DAVID S NAME NAME STREET ADDRESS STREET ADDRESS 4141 BAYVIEW DR. CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33308 Change Addition ☐ Delete TITLE TEBOUL. GENEVIEVE NAME NAME STREET ADDRESS STREET ADDRESS 4141 BAYVIEW DR CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33308 ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP ☐ Delete TITI F ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IF CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP 13. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if

Date

Daytime Phone #