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 # P97000066825 (5)

CAROUSEL GRILLE, INC.

Principal Place of Business

Mailing Address

FILED Feb 02 1998 8:00am Secretary of State



98 S.E. ETH AVENUE DELRAY BEACH FL 33483		98 S.E. 6TH AVENUE DELRAY BEACH FL 33483				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
						08/01/1997	
2. Principal P	lace of Business	2a. Mailing Address				4. FFI Number Applied For	\dashv
21		26				65-07722/9 Not Applica	ole
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				SQ 75 Additional	
22		27				5. Certificate of Status Desired Fee Required	
City & State	0	City & State				6. Election Campaign Financing \$5.00 May Be	ヿ
23		28				Trust Fund Contribution Added to Fees	
Zip	Country	Zφ	Cou	ıntry	,	8. This corporation owes or has paid the current year Intangible	
24 25 29 9, Name and Address of Current Registered Agent			30			Personal Property Tax due June 30.	
		nt Registered Agent	·	24		10. Name and Address of New Registered Agent	
	INGS, INC.		8:		Name		ı
	32 N.W. 16TH STREET		ļ.		Street Ad	dress (P.O. Box Number is Not Acceptable)	\dashv
FT.	LAUDERDALE FL 33311-4132						
				83			
				84	City	■■ 85 Zip Code	\dashv
					•		
11. Pursuant t	to the provisions of Sections 607.05 egistered agent, or both, in the State	02 and 607.1508, Florida Statu n of Etorida, Such change was	ites, the al	bove d by	e-named co	orporation submits this statement for the purpose of changing its registers ration's board of directors. I hereby accept the appointment as registered	g
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, F	lorida Stat	ules	3,	tation a deciral or directors. Thereby accept the appointment as registered	
SIGNATURE							
	Signature, typed or printed name of registered ag		_	d Age	nt signature req	puired when reinstaling) DATE	
12.	D OFFICERS AN	DELETE	13.	T1 C		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
NAME		C DELETE	1.1 Tr			☐ Change ☐ Additi	on 3
1	EICHAS, TERRY R 98 S.E. 6TH AVENUE		1.2 NA				
STREET ADDRESS					ADDRESS		ļ
CITY-ST-ZIP TITLE	DELRAY BEACH FL 33483	DELETE	1.4 CIT DELETE 2.1 TIT		1 - ZIP		
NAME						Change Additi	» `
STREET ADDRESS			2.2 NAME			to the	
			2.3 STREET ADDRES 2. 4 CITY-ST-ZIP		ľ		
CITY-ST-ZIP TITLE		DELETE	DELETE 3.1 1(1		I - ZIP	Change Additi	
NAME		C beitit	3.2 N/			∟ Change ∟ Additi	71
STREET ADDRESS					ADDRECO		
CITY-ST-ZIP					ADDRESS		
TITLE	31-211		3.4. C(1)Y-\$1-Z(P) EX.ETE 4.1 TITLE		1-214	☐ Change ☐ Additi	
NAME		Eng oracit	4. 2 N		1	□ Change □ Madril	"
STREET ADDRESS			- 6		ADDRESS		
CITY-ST-ZIP							
TITLE		DELETÉ	4.4 CHY- 5.1 THLE		- 24"	☐ Change ☐ Addition	<u></u>
NAME			5 2 NA			Sharigo L. Addition	"
STREET ADDRESS			1		address		
CITY-ST-ZIP			5.4 CIT				
TITLE		DELETE	6.1 TIT		- 411	☐ Change ☐ Addilio	<u>,n</u>
NAME		Print Common N	6.2 NA				"
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			6.3 STREET ADDRESS 6.4 CITY-S1-ZIP				
BM			■ U.4 UII	1 - 01	411		- 1

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 suppliemental annual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an aliachment with an address.