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

PROFIT: CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000079293

1. Corporation Name

PAPA RUDY'S RESTAURANT, CORP.

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90159 007 ***150.00



Principal Place of Business Mailing Address						1 18811688 118 18711 16811 MEIN MBIN BRIN	TREST FRANK IMIEM STATE) 10100 JIH 1001	
7173 WEST FLAGLER STREET 7173 WEST FLAGLER STREE MIAMI FL 33144 MIAMI FL 33144			r			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed 09/12/1997	_		
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number	Ar	oplied For	
26						65-0783486	No.	ot Applicable	
Suite, Apt. #, etc. 27		Suite, Apt. #, etc.	The state of the s		~ -	5Certifcate of Status Desired		Additional equired	
City & State City & State						6. Election Campaign Financing	\$5.00	May Be	
23 28		— ′				Trust Fund Contribution	•	to Fees	
Zip					_	8. This corporation owes the current year	r Intangible		
24	29 30					Personal Property Tax.	ŽÝes	□No	
	9. Name and Address of Current	<u></u>	'			10. Name and Address of New Registe	red Agent		
	:		81	Name					
ROD	riguez, rodolfo		-		4 44	(D.O. Day March and J. March Assessable)			
7173 W FLAGLER ST			82	Street	Addres	ess (P.O. Box Number is Not Acceptable)			
AAIM	AI FL 33144		83						
:			84	City			FL 85 Zip	Code	
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						when reinstating) OAT			
12.	Signature, typed or printed name of registered agent OFFICERS AND		13.	nt signature i	requirea v	when reinstating) DAT ADDITIONS/CHANGES TO OFFICERS		ORS IN 12	
TITLE	D OFFICERS AND	DELETE	1.1 TITLE	_	Π.	7.00.110110,011.01000 / 0 0 / 1	☐ Change	Addition	
i j	1 -		1.2 NAME					_	
NAME	RODRIGUEZ, RODOLFO 7173 WEST FLAGLER STREET		-	T ADDRESS	i				
STREET ADDRESS									
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NAME				TADDRESS					
STREET ADDRESS		ĺ							
CITY-ST-ZIP	'		6.4 CITY-S	1-212	l				

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 operation of the corporation of the corporation of the corporation of the operation of

URE REQUIRED

AND PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: