

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

FILED
Jan 28 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000079431 (7)
 Corporation Name
TATU RESTAURANT, INC.



Principal Place of Business 18301 BISCAYNE BLVD 2ND FLOOR NORTH MIAMI BEACH FL 33160	Mailing Address 18301 BISCAYNE BLVD 2ND FLOOR NORTH MIAMI BEACH FL 33160
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/12/1997	
21 17071 W. Dixie Highway	26 17071 W. Dixie Highway	4. FEI Number 65-0785939		Applied For Not Applicable	
22	27	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23	28	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 33160	25	29 33160	30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
WEISSER, MICHAEL H 18301 BISCAYNE BLVD 2ND FLOOR NORTH MIAMI BEACH FL 33160				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				85	Zip Code
				FL	

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 _____
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEISSER, MICHAEL H	1.2 NAME	
STREET ADDRESS	18301 BISCAYNE BLVD.	1.3 STREET ADDRESS	17071 W. Dixie Highway
CITY-ST-ZIP	AVENTURA FL 33160	1.4 CITY-ST-ZIP	N. Miami Beach, FL 33160
TITLE	VD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRUDMAN, NORMAN	2.2 NAME	
STREET ADDRESS	18301 BISCAYNE BLVD.	2.3 STREET ADDRESS	17071 W. Dixie Highway
CITY-ST-ZIP	AVENTURA FL 33160	2.4 CITY-ST-ZIP	N. Miami Beach FL 33160
TITLE	SD	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRUDMAN, ADELE	3.2 NAME	
STREET ADDRESS	18301 BISCAYNE BLVD	3.3 STREET ADDRESS	17071 W. Dixie Highway
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33160	3.4 CITY-ST-ZIP	N. Miami Beach FL 33160
TITLE	YD	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEISSER, DARIA	4.2 NAME	
STREET ADDRESS	18301 BISCAYNE BLVD	4.3 STREET ADDRESS	17071 W. Dixie Highway
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33160	4.4 CITY-ST-ZIP	N. Miami Beach, FL 33160
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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; 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, or on an attachment, with an address.

SIGNATURE:

[Handwritten Signature]
 Michael Weisser 1-19-98 305-644-717

CR2E034 (10/97)