## 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 # P97000082033 (6)

## FILED Apr 27 1998 8:00am Secretary of State

MAIN GRILLE AND TO-HO CAFI				
Principal Place of Business	Mailing Address			5119 11911 SEIGE 11118E 1111 1941
2881 CLARK ROAD 2881 CLARK ROAD SARASOTA FL 34231 SARASOTA FL 34231			DO NOT WRITE IN THE	S SPACE
			3. Date Incorporated or Qualified	3 3FACL
			09/22/1997	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26 P O BO	v 1841	65-0783736	Not Applicable
Suite, Apt. #, elc. 22 JNIT 22	Suite, Apt. #, etc.	7	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State	~ ^	6. Election Campaign Financing	\$5.00 May Be
23	28 SARASOTA	a FL	Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the c	_ ' _ '
24 25	20 3423018413	o USA	Personal Property Tax due June 30.	Yes No
9. Name and Address of Cui	rent Hegistered Agent	81 Name	10. Name and Address of New Registere	a Agent
YAM, HOUR 3810 SOUTHERN PARKWAY		Name		
		82 Street Address (P.O. Box Number is Not Acceptable)		
BRADENTON FL 34205		83		
		84 City	F	85 Zip Code
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corpor			oration submits this statement for the purpose	of changing its registered
office or registered agont, 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 607.0506, Florida Statutes.				
SIGNATURE	anguine of obotton of tool	da Olalolos.		ľ
Signature, typed or printed name of registered		Registored Agent signature require		f
	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE PST	☐ DELETE	1.1 TITLE		Change Addition
NAME HOUR YAM	HON PKINY	1.2 NAME		/ `
STREET ADDRESS 3810 SOUTH	ERN PKWY FL 34205	1.3 STREET ADDRESS		֓֞֞֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֡֓֓֡֓֡֓֡֓֡
TITLE	DELETE	2.1 TITLE		Change Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2.4 CITY-ST-ZIP		
TITLE	DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		1
STREET ADDRESS		3.3 STREET ADDRESS		
CITY - ST - ZIP		3.4. CITY-ST-ZIP		
TITLE	DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP	DELETE	4.4 CITY-ST-ZIP		Change Addition
TITLE	L' DECEIE	5.1 TITLE		Change Addition
NAME OTDECT ADDRESS		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-Z#P	☐ DELETE	5.4 CHY-ST-ZIP 6.1 TITLE		Change Addition
NAME	<b>_</b>	6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		i i
	4 30 000 000 000 000 000 000 000 000 000	/ U U	0 0 440 00/04/01 51 14 00-44 44 46 46	197 16 - 1 A - 1 A - 1 A - 1

4. 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, or on an attachment with an address.

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