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

PROFIT CORPORATION ANNUAL REPORT

1998

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 14 1998 8:00am

Secretary of State

Change

Addition

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000082425 (4)

KING OF THE GREEKS, INC.

Principal Place of Business Mailing Address 4801 S UNIVERSITY DRIVE 4801 S UNIVERSITY DRIVE SUITE 307 SUITE 307 FORT LAUDERDALE FL 33328 DO NOT WRITE IN THIS SPACE FORT LAUDERDALE FL 33328 3. Date Incorporated or Qualified 09/23/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 2630 Hollywood Blod 2630 Holyward Blud Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible ÚSΛ Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name FILINGS, INC. ATT Fored 3732 N.W. 16TH STREET O. Box Number is Not Acceptable) Street Address 82 FT. LAUDERDALE FL 33311-4132 O COUNT 83 84 WOOD 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 Provida 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, Seglion 607,0505, Florida Statutes. agent. I am familiar with and ac-MYATT FIRM SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE FRIED. HYATT NAME 1.2 NAME 2630 tollywood Blad Suile 101 4801 S UNIVERSITY DR. STE 307 STREET ADDRESS 1.3 STREET ADDRESS FORT LAUDERDALE FL 33328 Hollywood, FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 21 TITLE NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - S1 - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 417016 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

Indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the reserver or mistry employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it changed, or on an attachmal with a underess.

SIGNATURE:

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

61 TITLE

6.2 NAME

6.3 STREET ADDRESS

DELETE