CR2E034 (11/98)

FILE	NOW: FILING FEI	E AFTÉR MA	AY 1ST IS	\$ 550.	.00						
COF ANŅU	PORATION AL REPORT 999 FLORIDA DEPARTMEN Katherine Ha Secretary of Sta DIVISION OF CORPO		THENT C	AT ONSTATE		SEUNETARY OF STATE STYISION OF CORPORATIONS					
							99 OCT -6 AM 9: 55				
1. Corporation Name											
FOOD S	ERVICE CONCEPTS, IN	IC.									
Principal Place of Business Mailing Address							i andruadr jin v	NEWS EMPLIE MANINE MANINE MANEES I	ULT ULT	IŽIII IBBI IBDI	
2707 MEADOWWGOD COURT 2707 MEADOWWOOD COURT FORT LAUDERBALE FL 33322 FORT LAUDERDALE FL 33322											
4	1 John District VE date							O NOT WRITE IN THIS SPACE			
							3. Date Incorporate 01/26/1998	d or Qualifed			
2. Principal P	lace of Business	2a. Mailir	g Address				4. FEI Number		Apı	olied For	
21		26	A - 1 4/ - 12				65-08	122364	 	Applicable	
Suite, Apt	#, etc.	27	Apt. #, etc.				5. Certifcate of Stat	us Desired 📋	\$8.75 A Fee Re		
City & Stat							6. Election Campak Trust Fund Contr	- ,,	\$5.00 Added to		
Zip	Country Zip			Country			This corporation owes the current year Intengible				
24 25 29 29 29 29 21 29 29 21				30			Personal Property Tax. Yes No 10. Name and Address of New Registered Agent				
1/1 00.1				7	11 Name	•					
	ighoffer, teddy d West flagler street			į.	32 Stree	t Addres	s (P.O. Box Number i	s Not Acceptable)			
SUITE 2200				1	33						
MIAI	MI FL 33130				14 City				85 Zip C	·ada	
office or r agent. I a	to the provisions of Sections 60 egistered agent, or both, in the m familiar with, and accept the o	State of Florida. Suc	h change was auf	thorized i	by the con	d corpoi poration	ation submits this stati 's board of directors, i	ement for the purpos hereby accept the a	e of changing its ppointment as req	registered gistered	
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: R				agistared Agent algosture require						
- 12 .	OFFICER	S AND DIRECTOR	S DELETE	13.			ADDITIONS/CHAP	NGES TO OFFICERS	S AND DIRECTOR Change	RS IN 12	
NAME	CHESS, STEVEN			12 NAM			900	00301	_ •		
STREET ADDRESS	2707 MEADOWWOOD CO			1.3 STR	EET ADDRESS	s		-10/12/99-	-010600	20	
CITY-ST-ZIP	FORT LAUDERDALE FL 33	3322	DELETE	1.4 CFTY 2.1 TITL	-ST-ZIP			****550.0	U ¥¥₩¥55	O. OO	
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CITY ST-ZIF					Y-ST-ZIP	↓					
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TITLE			DELETE	5.1 TITU					☐ Change	☐ Addition	
NAME STREET ADDRESS				5.2 NAM 5.3 STR	EET ADORES!	s	_			1	
CITY-ST-ZIP					-ST-ZIP	1	, \				

SIGNATURE:

6.4 CITY-ST-ZP

14. I hereby certify that the information supplied with this filing does not qualify for the exercise 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, with all other like empowered.

SIGNATURE:

SIGNATURE:

SIGNATURE:

Deglime Phone #

6.1 TITLE

62 NAME

6.3 STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

TIT_E

NAME

DELETE

Change

☐ Addition