

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY 12 PM 2: 12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
00001486460

DO NOT WRITE IN THIS SPACE

1. Corporation Name: **INTERNATIONAL FAST FOOD CORPORATION**

DOCUMENT # **S98502**

Mailing Address: **1000 Lincoln Road, Miami Beach, FL 33139**

Principal Place of Business: **1000 Lincoln Road, Miami Beach, FL 33139**

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2. Mailing Address (21) Suits, Apt. #, etc. (22) City & State (23) Zip (24) Country

2a. Principal Place of Business (26) Suits, Apt. #, etc. (27) City & State (28) Zip (29) Country

3. Date Incorporated or Qualified: **12/06/91**

3a. Date of Last Report: **06/14/94**

4. FEI Number: **65-0302338**

5. Certificate of Status Desired: **\$8.75**

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

7. Nonprofit Exempt from \$138.75 Supplemental Fee:

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: **Mitchell Rubinson, 1000 Lincoln Road, Miami Beach, FL 33139**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 or 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	COB/CEO/P	11 TITLE	
12 NAME	Rubinson, Mitchell	12 NAME	
13 STREET ADDRESS	1000 Lincoln Road	13 STREET ADDRESS	
14 CITY-ST-ZIP	Miami Beach, FL 33139	14 CITY-ST-ZIP	
21 TITLE	VP/COO	21 TITLE	
22 NAME	Blumenthal, Leon	22 NAME	
23 STREET ADDRESS	1000 Lincoln Road	23 STREET ADDRESS	
24 CITY-ST-ZIP	Miami Beach, FL 33139	24 CITY-ST-ZIP	
31 TITLE	CFO/T/D	31 TITLE	
32 NAME	Groth, Stephen R.	32 NAME	
33 STREET ADDRESS	1000 Lincoln Road	33 STREET ADDRESS	
34 CITY-ST-ZIP	Miami Beach, FL 33139	34 CITY-ST-ZIP	
41 TITLE	Vice Chairman	41 TITLE	
42 NAME	Mullin, Francis I.	42 NAME	
43 STREET ADDRESS	1000 Lincoln Road	43 STREET ADDRESS	
44 CITY-ST-ZIP	Miami Beach, FL 33139	44 CITY-ST-ZIP	
51 TITLE	D	51 TITLE	
52 NAME	Firestone, George	52 NAME	
53 STREET ADDRESS	1000 Lincoln Road	53 STREET ADDRESS	
54 CITY-ST-ZIP	Miami Beach, FL 33139	54 CITY-ST-ZIP	
61 TITLE	Assistant Secretary	61 TITLE	
62 NAME	Friedman, Jill	62 NAME	
63 STREET ADDRESS	1000 Lincoln Road	63 STREET ADDRESS	
64 CITY-ST-ZIP	Miami Beach, FL 33139	64 CITY-ST-ZIP	

5/12/95 TJS

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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 have fulfilled all obligations concerning unclaimed property imposed by Chapter 717, Florida Statutes, that I am an officer or director of the corporation or the receiver or trustee empowered to manage the estate as required by Chapter 607 or Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an address. **Jill Friedman, Assistant Secretary**

SIGNATURE: _____ (305) 531-5800 May 10, 1995

1201 HAYS STREET
TALLAHASSEE, FL 32301
904-222-9171
904-222-0393 FAX

800-342-8086



ACCOUNT NO. : 072100000032
REFERENCE : 598145 4656A
AUTHORIZATION : *Patricia Pyjits*
COST LIMIT : \$ 225.00

ORDER DATE : May 12, 1995

ORDER TIME : 10:29 AM

ORDER NO. : 598145

CUSTOMER NO: 4656A

CUSTOMER: Sheryl Cohen, Legal Assistant
Greenberg Traurig Hoffman
22nd Floor
1221 Brickell Avenue
Miami, FL 33131-3238

DOMESTIC FILINGS

NAME: INTERNATIONAL FAST FOOD
CORPORATION

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lynne Roberts

EXAMINER'S INITIALS _____