

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northing
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

COUNTY - 1 MAY 3:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V33892 (3)

1. Corporation Name
DON CARLOS RESTAURANT, INC.

Principal Place of Business Mailing Address
3840 NAVY BLVD 3840 NAVY BLVD
PENSACOLA FL 32507 PENSACOLA FL 32507

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		26		05/04/1992	05/01/1994
22 State Apt # etc		27 State Apt # etc		4. FEI Number	Applied For
23 City & State		28 City & State		59-3123168	Not Applicable
24 Zip		29 Zip		5. Certificate of Status Desired	\$8.75 Additional Fee Required
25 Country		30 Country		6. Election Campaign Financing	\$5.00 May Be Added to Fees
				7. This corporation has liability for intangible tax under S. 196(1)(3) Florida Statutes	☒ Yes ☐ No

9. Name and Address of Current Registered Agent		10. Name and Address of Now Registered Agent	
REDISH, CARL S. 3840 NAVY BLVD PENSACOLA FL 32507		B1 Name B2 Street Address (P.O. Box Number is Not Acceptable) B3 B4 City FL B5 Zip Code	

11. Pursuant to the provisions of Sections 607 (1)(b), (1)(c), and 607 (1)(d), 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 Sections 607 (1)(b), Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (If any)	
TITLE	PD REDISH, CARL SLATER 7012 LONGLEAF CREEK DR PENSACOLA FL	1.1 TITLE	☐ Change ☐ Addition
NAME	STD REDISH, MALEA L 7012 LONGLEAF CREEK DR PENSACOLA FL	1.2 NAME	
STREET ADDRESS	VD REDISH, D.S. 342 BUNKER HILL DR PENSACOLA FL	1.3 STREET ADDRESS	
CITY, ST, ZIP		1.4 CITY, ST, ZIP	
		2.1 TITLE	☐ Change ☐ Addition
		2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY, ST, ZIP	
		3.1 TITLE	☐ Change ☐ Addition
		3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY, ST, ZIP	
		4.1 TITLE	☐ Change ☐ Addition
		4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY, ST, ZIP	
		5.1 TITLE	☐ Change ☐ Addition
		5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY, ST, ZIP	
		6.1 TITLE	☐ Change ☐ Addition
		6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 193 (1)(b), Florida Statutes. I further certify that the information included in this annual report or annual consolidated 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 incorporator or organizer or promoter of the corporation and that my signature is required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on any other document with an address.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Carl S. Redish

09/27/95