

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

FILED
Apr 23 1998 8:00am
Secretary of State

DOCUMENT # V54490 (0)
1. Corporation Name
DURANGO STEAKHOUSE OF CLEARWATER, INC.



Principal Place of Business
2325 ULMERTON ROAD
SUITE 20
CLEARWATER FL 34622
US

Mailing Address
2325 ULMERTON ROAD
SUITE 20
CLEARWATER FL 34622
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		07/27/1992	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-3171974	
24 Country		30 Country		Applied For	
				Not Applicable	
				5. Certificate of Status Desired	
				\$8.75 Additional Fee Required	
				6. Election Campaign Financing	
				\$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible	
				Personal Property Tax due June 30.	
				Yes No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
PARRY, EDWARD H. 2325 ULMERTON ROAD SUITE 20 CLEARWATER FL 34622				81 Name Gregory D. Morris			
				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, 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, Florida Statutes.

SIGNATURE		Signature, typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when reinstating)		DATE									
12. OFFICERS AND DIRECTORS								13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12							
TITLE		DC		<input type="checkbox"/> DELETE		1.1 TITLE		<input type="checkbox"/> Change		<input type="checkbox"/> Addition					
NAME		BULLARD, FRED B JR				1.2 NAME									
STREET ADDRESS		2325 ULMERTON RD SUITE 20				1.3 STREET ADDRESS									
CITY-ST-ZIP		CLEARWATER FL				1.4 CITY-ST-ZIP									
TITLE		DS		<input type="checkbox"/> DELETE		2.1 TITLE		<input type="checkbox"/> Change		<input type="checkbox"/> Addition					
NAME		BULLARD, KAROL K.				2.2 NAME									
STREET ADDRESS		2325 ULMERTON ROAD SUITE 20				2.3 STREET ADDRESS									
CITY-ST-ZIP		CLEARWATER FL				2.4 CITY-ST-ZIP									
TITLE		DVPT		<input checked="" type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change		<input type="checkbox"/> Addition					
NAME		PARRY, EDWARD H.				3.2 NAME									
STREET ADDRESS		2325 ULMERTON ROAD SUITE 20				3.3 STREET ADDRESS									
CITY-ST-ZIP		CLEARWATER FL				3.4 CITY-ST-ZIP									
TITLE		AS		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change		<input type="checkbox"/> Addition					
NAME		DERRY, REBECCA				4.2 NAME									
STREET ADDRESS		2325 ULMERTON ROAD SUITE 20				4.3 STREET ADDRESS									
CITY-ST-ZIP		CLEARWATER FL				4.4 CITY-ST-ZIP									
TITLE		DP		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change		<input type="checkbox"/> Addition					
NAME		WALKER, MITCH				5.2 NAME									
STREET ADDRESS		2325 ULMERTON RD., #20				5.3 STREET ADDRESS									
CITY-ST-ZIP		CLEARWATER FL				5.4 CITY-ST-ZIP									
TITLE				<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change		<input type="checkbox"/> Addition					
NAME						6.2 NAME									
STREET ADDRESS						6.3 STREET ADDRESS									
CITY-ST-ZIP						6.4 CITY-ST-ZIP									

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 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.

SIGNATURE

[Signature]

CR2E034 (10/97)