FILE NOW: FILING FE PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTN Katherine Secretary o DIVISION OF CO	MENT OF STATE Harris of State	Ju	FIL] n 08, 199 Secretary 06-08-1999 90010	99 8:00 of Sta	te	
DOCUMENT # P333 1. Corporation Name EATERIES, INC.	372							
Principal Place of Business	Mai	iling Address		1 10811081	198 11199 IIIBB (111) (9819 II9) v	1911 01011 01911 07071 071	<b>11 616</b> 11 10001	
3240 W. BRITTON ROAD. SUITE 202 OKLAHOMA CITY OK 73120-2032		) W. Britton Road. Suit Ahoma City ok 73120-20		3. Date Incorpor	DO NOT WRITE IN T rated or Qualifed	HIS SPACE		
		-		03/19/199		~ ~		
2. Principal Place of Business	2a.	Mailing Address		4. FEI Number		· · · · · ·	lied For	
21 Suite Ant # etc	26	Suite, Apt. #, etc.		73-123034	18	Not	Applicable	
Suite, Apt. #, etc.	27	Suite, Apr. #, 515.		5. Certifcate of	Status Desired	Fee Rec		
City & State		City & State		6. Election Carr Trust Fund C	, , ,	\$5.00 M Added to		
Zip Country		Zip	Country		ion owes the current yea	ar Intangible		
24 25	29	30	<u>א</u>	Personal Pro			⊡No	
9. Name and Address of	Current Regist	ered Agent	81 Name	10. Name and A	ddress of New Registe	rea Agent		
CT CORPORATION SYSTEM				Address (P.O. Box Num	per is Not Acceptable)			
1200 S. PINE ISLAND ROAD				Address (1.0. 607 (10.1.				
							1	
PLANTATION FL 33324			83					
			83 84 City			FL 85 Zip C	ode	
PLANTATION FL 33324	607.0502 and 60	17.1508, Florida Statutes,	84 City	corporation submits this	statement for the ourpos	<b>FL</b>	registered	
PLANTATION FL 33324	e State of Florida	a Such change was auth	84 City	corporation submits this oration's board of directo	statement for the ourpos	<b>FL</b>	registered	
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PLANTATION FL 33324         11. Pursuant to the provisions of Sections of office or registered agent, or both, in the agent, I am familiar with, and accept the SIGNATURE         Signature, typed or printed name of registered agent, or both, in the agent, I am familiar with, and accept the SIGNATURE         12. OFFICE         TITLE       PD         NAME       ORZA, VINCENT D., JR.         STREET ADDRESS       3240 W., BRITTON RD.#         CITY-ST-ZIP       OKLAHOMA CITY OK 73         TITLE       V         NAME       BURKE, JAMES M.         STREET ADDRESS       3240 W., BRITTON RD.#         CITY-ST-ZIP       OKLAHOMA CITY OK 73         TITLE       V         NAME       GABLE, COREY         STREET ADDRESS       3240 W. BRITTON RD. #         CITY-ST-ZIP       OKLAHOMA CITY OK 73         TITLE       V         NAME       GABLE, COREY         STREET ADDRESS       3240 W. BRITTON RD. #         CITY-ST-ZIP       OKLAHOMA CITY OK 73         TITLE       S         NAME       ORZA, PATRICIA L.         STREET ADDRESS       1901 MISTLETOE LANE         CITY-ST-ZIP       OKC OK 73013         TITLE       D         NAME	te State of Florida e obligations of, istared agent and title if ERS AND DIRE( #202 3120 #202 3120 #202 3120	a. Such change was auth Section 607.0505, Florida (NOTE: Re CTORS DELETE DELETE DELETE	B4         City           the above-named norized by the corplast signature is         astatutes.           13.         1.1 ITTLE           12 NAME         13 STREET ADDRESS           14 City-ST-ZIP         2.1 ITTLE           21 NAME         23 STREET ADDRESS           2.4 City-ST-ZIP         3.1 ITTLE           3.2 NAME         3.3 STREET ADDRESS           3.4 City-ST-ZIP         3.1 ITTLE           3.2 NAME         3.3 STREET ADDRESS           3.4 City-ST-ZIP         1.1 ITTLE           3.2 NAME         3.3 STREET ADDRESS           3.4 City-ST-ZIP         1.1 ITTLE           3.2 NAME         3.3 STREET ADDRESS           3.4 City-ST-ZIP         1.1 ITTLE           5.1 TITLE         5.2 NAME           5.3 STREET ADDRESS         3.4 CITY-ST-ZIP	equired when reinstating) ADDITIONS/C	statement for the purpos rs. I hereby accept the a DAT HANGES TO OFFICER	L     Granging its r     ppointment as reg     Change     Change     Change     Change	egistered istered RS IN 12 Addition	
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PLANTATION FL 33324         11. Pursuant to the provisions of Sections of office or registered agent, or both, in the agent. I am familiar with, and accept the SIGNATURE         Signature, typed or printed name of registered address of the provisions of Sections 6         SIGNATURE         Signature, typed or printed name of registered address of the provisions of Sections 6         SIGNATURE         Signature, typed or printed name of registered address of the provisions of Sections 6         OFFICE         III.         NAME         BURKE, JAMES M.         STREET ADDRESS         OKLAHOMA CITY OK 73         TITLE         VI         NAME         GRZA, W., BRITTON RD. #         OKLAHOMA CITY OK 73         TITLE         VI         NAME         GRZA, PATRICIA L.         STREET ADDRESS         OKC OK 73013         TITLE         D         NAME         ORZA, PATRICIA L.         STREET ADDRESS <td colspa<="" td=""><td>e State of Florid: e obligations of, stered agent and tife if ERS AND DIREC #202 3120 #202 3120 #202 3120 = E.</td><td>a. Such change was auth Section 607.0505, Florida (NOTE: Re CTORS DELETE DELETE DELETE DELETE DELETE DELETE</td><td>84         City           the above-named         horized by the corplast of the corplast o</td><td>ADDITIONS/C ADDITIONS/C ADDITIONS/C Marc Buen 912 Fox Hill Edmond Of</td><td>ng 1300 1300 14</td><td></td><td>egistered istered RS IN 12 Addition</td></td>	<td>e State of Florid: e obligations of, stered agent and tife if ERS AND DIREC #202 3120 #202 3120 #202 3120 = E.</td> <td>a. Such change was auth Section 607.0505, Florida (NOTE: Re CTORS DELETE DELETE DELETE DELETE DELETE DELETE</td> <td>84         City           the above-named         horized by the corplast of the corplast o</td> <td>ADDITIONS/C ADDITIONS/C ADDITIONS/C Marc Buen 912 Fox Hill Edmond Of</td> <td>ng 1300 1300 14</td> <td></td> <td>egistered istered RS IN 12 Addition</td>	e State of Florid: e obligations of, stered agent and tife if ERS AND DIREC #202 3120 #202 3120 #202 3120 = E.	a. Such change was auth Section 607.0505, Florida (NOTE: Re CTORS DELETE DELETE DELETE DELETE DELETE DELETE	84         City           the above-named         horized by the corplast of the corplast o	ADDITIONS/C ADDITIONS/C ADDITIONS/C Marc Buen 912 Fox Hill Edmond Of	ng 1300 1300 14		egistered istered RS IN 12 Addition
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