

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000156369

Entity Name: 13 CAFE & LOUNGE, INC.

FILED  
Feb 04, 2009  
Secretary of State

## Current Principal Place of Business:

2650 MCCORMICK DR., STE. 130  
CLEARWATER, FL 33759

## New Principal Place of Business:

2475 MCMULLEN BOOTH ROAD  
CLEARWATER, FL 33759

## Current Mailing Address:

2650 MCCORMICK DR., STE. 130  
CLEARWATER, FL 33759

## New Mailing Address:

PO BOX 1419  
PALM HARBOR, FL 34682

FEI Number: 20-3856103

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KURLAND, DAVID J ESQ  
850 CLEARWATER-LARGO ROAD SW  
LARGO, FL 337704472 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SCAGNELLI, PAUL  
Address: 2650 MCCORMICK DR., STE. 130  
City-St-Zip: CLEARWATER, FL 33759

Title: SD ( ) Delete  
Name: SHEAR, ROBERT L.  
Address: 2650 MCCORMICK DR., STE. 130  
City-St-Zip: CLEARWATER, FL 33759

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SCAGNELLI, PAUL  
Address: PO BOX 1419  
City-St-Zip: PALM HARBOR, FL 34682

Title: SD (X) Change ( ) Addition  
Name: SHEAR, ROBERT L.  
Address: PO BOX 1419  
City-St-Zip: PALM HARBOR, FL 34682

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL SCAGNELLI

PRE

02/04/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date