Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90069 048 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000064031

1. Corporation Name

CEDAR F	RIVER SEAFOOD OF STAF	RKE, INC.					
Principal Place	e of Business	Mailing Address	_		I I BENTARAS INTO SANGO MONTO DESIGNADA IN DATA	' #811	148)
900 WALNUT STREET STARKE FL 32291		% FELLOWS. DAN R 2483 BENTRIDGE CT ORANGE PARK FL 32065 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
					08/17/1995		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	Applied Fo	
21		26			59-3332914	Not Applic	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	Fee Required	aı
City & State	^	City & State			6. Election Campaign Financing	\$5.00 May Be	
—	e	28			Trust Fund Contribution	Added to Fees	
23	Country	Zip	Countr		This corporation owes the current year.	ear Intangible	
24	25	29	30		Personal Property Tax.	ØYes □No	
	9. Name and Address of Curre				10. Name and Address of New Regis	tered Agent	
			8	1 Name			į
ROTHSTEIN, SIMON D			8:	2 Street Add	Iress (P.O. Box Number is Not Acceptable)		
4417 BEACH BLVD #104			L				
JACK	KSONVILLE FL 32207		8	3			
			8	4 City		85 Zip Code	
					poration submits this statement for the purp	FL 00 Lip course	red
office or r agent. I a	egistered agent, or both, in the Stat m familiar with, and accept the oblig	e of Florida. Such change was all	rnonzea n	v tne corporau	ion's board of directors. I hereby accept the	appointment as registered	1
SIGNATURE	Signature, typed or printed name of registered as	gent and title if applicable. (NOTE: I	Registered Ag	ent signature require	55 111611 751151511597	ATE	
12.	OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE		
TITLE	D	☐ DELETE	1.1 TITLE			☐ Change ☐ A	ddition
NAME	FELLOWS, DAN		1.2 NAME	Ē			
STREET ADDRESS	2483 BENTRIDGE COURT		1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	ORANGE PARK FL 32065		1.4 CITY-		AND THE STREET	☐ Change ☐ A	ddition
TITLE	D	☐ DELETE	2.1 TITLE	- 1		☐ Criddige ☐ A	QQIBO(I
NAME	BELL, ROLAND R		2.2 NAME				
STREET ADDRESS	3461 INLET LN			ET ADDRESS			
CITY-ST-ZIP	ORANGE PARK FL	☐ DELETE	2.4 CITY			Change A	ddition
TITLE	D D KATUV	□ beccic	3.2 NAME			v	
NAME	BELL, KATHY			ET ADDRESS			
STREET ADDRESS	3461 INLET LN ORANGE PARK FL		3.4. CITY	ŀ			
CITY-ST-ZIP TITLE	UNANGE PARK FE	☐ DELETE	4.1 TITLE			☐ Change ☐ A	ddition
NAME			4. 2 NAM	ε		•	
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			4.4 CITY-				
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ A	Addition
NAME			5.2 NAME	E			
STREET ADDRESS			5.3 STRE	ET ADDRESS			
CITY-ST-ZIP			5.4 CITY				
TITLE		☐ DELETE	6.1 TITLE			Change A	Addition
NAME			6.2 NAME	E			
STREET ADDRESS	}		6.3 STRE	ET ADDRESS			

CITY-ST-ZIP 14. 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR