Applied For

Fee Required \$5.00 May Be

Added to Fees

□No

Not Applicable \$8.75 Additional

## 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 # P96000078690

WEIFFENBACH & THOMAS, P.A.

538 12TH ST W

CORTEZ BAIT & SEAFOOD, IN					
Principal Place of Business	Mailing Address	i	[ { [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]		
4258 119TH ST. WEST CORTEZ FL 34215 US	DO NOT WRITE IN THIS SPAC  3. Date incorporated or Qualifed  09/20/1996				
2. Principal Place of Business	2a. Mailing Add	ress	4. FEI Number 65-0699661	T	
Suite, Apt. #, etc.	Suite, Apt. #	, etc.	5. Certificate of Status Desired	\$8. F	
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5 A	
Zip Country <b>25</b>	Zip 29	Country 30	This corporation owes the current year Intang Personal Property Tax.	jible ] Ye	
	Current Registered Agent		10. Name and Address of New Registered Ag	ent	

## **FILED** Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90137 037 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

82 Street Address (P.O. Box Number is Not Acceptable)

BRADENTON FL 34205		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	Lutte if applicable (NOTE: R	egistered Agent sig	gnature required when reinstating)	DATE	- }				
12.	OFFICERS AND D		13.	ADDITIONS/CHANGES TO	OFFICERS AND DIRECTORS IN	N 12				
TITLE	PT	☐ DELETE	1.1 TITLE	PT	Change 🔲	Addition				
NAME	HANYAS, JOHN T		1.2 NAME	BANYAS, John, 7						
STREET ADDRESS	4436 124TH ST. WEST		1.3 STREET AD	XORESS 4436 124th St. WE	s <i>t</i> -					
CITY-ST-ZIP	CORTEZ FL 34215		1.4 CITY-ST-ZI	BANYAS, John 7 HAGG 124H St. WES	<u> </u>					
TITLE	VPS	☐ DELETE	2.1 TITLE		☐ Change ☐	Addition				
NAME	MCVEY, KIMBERLY J		2.2 NAME							
STREET ADDRESS	4436 124TH ST. WEST		2.3 STREET AD	DORESS DORESS						
CITY-ST-ZIP	CORTEZ FL 34215		2. 4 CITY-ST-Z	žIP	<u>-</u>					
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐	Addition				
NAME			3.2 NAME							
STREET ADDRESS			3.3 STREET AD	DDRESS						
CITY-ST-ZIP			3.4. CITY-ST-Z	ZIP	•					
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐	Addition				
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREET AD	DDRESS		ţ				
CITY-ST-ZIP		•	4.4 CITY-ST-ZI	JP						
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐	Addition				
NAME			52 NAME			}				
STREET ADDRESS			5.3 STREET AD	DORESS						
CITY-ST-ZIP			5.4 CITY-ST-Z	JP						
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐	Addition				
NAME			6.2 NAME			Į				
STREET ADDRESS			6.3 STREET AD	DRESS		- 1				
CITY-ST-ZIP			6.4 CITY-ST-ZI							
14. I hereby o	ertify that the information supplied with the	nis filing does not qualify for t	he exemption	n stated in Section 119.07(3)(i), Florida Statut	es. I further certify that the inform as if made under path; that I am a	ation an				

81 Name

officer or director of the corporation or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am a 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.