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

PROFIT CORPORATION ANNUAL REPORT 1998 DOCUMENT # FAT BOYS' BAR-B-Q, INC.

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED									
Mar 05	1998 8:00am								
Secreta	ary of State								



Principal Place of Business Mailing Address						T TOOLING LINGS AND STATE THOSE ALONE OF STATE OF STATE OF STATES.	 		
6006 N ATLANTIC AVE 6006 N ATLANTIC AVE CAPE CANAVERAL FL 32820 CAPE CANAVERAL FL 3282			920			DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualified		
							06/04/1960		
_	ace of Business	2a. Mailing A	Address				· · · · · · · · · · · · · · · · · · ·	Applied For	
21 Suito Ant	H ato		Suite, Apt. #, etc.				¢0.76	Not Applicable	
Suite, Apt. #, etc.		27					5. Certificate of Status Desired \$8.75 Additional Fee Required		
City & State	J		City & State				6. Election Campaign Financing \$5.00 May Be		
23		28	28			1	Trust Fund Contribution		
Zip	Country	Country Zip Cou			untry 8. This corporation owes or has paid the current year Intangible				
24	25 a. Name and Address of Curren	29		30]			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent		
D.I		t nogistered Age	, , , , , , , , , , , , , , , , , , , ,		81	Name	10. (tallo alla radiosa di riori riogistolo a Agoria		
	VIŞ, MARY E 06 NORTH ATLANTIC AVE					Division & state	(D.O. Carabbara & Mar Accountable)		
	PE CANAVERAL, FL				82	Street Addr	dress (P.O. Box Number is Not Acceptable)		
	5973 FL 32920				83				
					84	City	FL 85 Z	p Code	
11. Pursuant t	a the provisions of Sections 607.050	2 and 607.1508. F	Iorida Statute	s, the at	00V6	e-named corp	poration submits this statement for the purpose of changing	j its registered	
office or re	egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such o	:hange was a	uthorized	d bv	the corporat	ion's board of directors. I hereby accept the appointment	as registered	
SIGNATURE	Signature, typed or printed name of registered age	ot and title if applicable	MOTE	· Repeterer	1 4 7 0	nt signature regult	rod when reinstating) DATE.		
12.	OFFICERS AND		(NOIC	13.	a Ago	rk agriatore requi	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	ORS IN 12	
TITLE	VP		DELETE	1.1 TII	TLE		☐ Chang	e 🔲 Addition	
NAME	DAVIS, CRAIG			1.2 NA	WE				
STREET ADDRESS 6006 NORTH ATLANTIC AVE				1.3 STREET ADDRESS		ADDRESS			
CITY-ST-ZIP	CAPE CANAVERAL, FL 3		-	1.4 CI		T-ZIP			
TITLE	PD	L	DELETE	2.1 TI			<u>↓</u> Chang	e L Addition	
NAME	DAVIS, MARY E			2.2 NA		[
STREET ADDRESS	6006 NORTH ATLANTIC AVE		2.3 STREET A						
CITY-ST-ZIP	CAPE CANAVERAL, FL 3	г	DELETE	2. 4 C	_	ST-ZIP	Chang	e Addition	
TITLE	WILSON, JEANNE	L] DECEME	3.2 NA					
NAME STREET ADDRESS	6006 NORTH ATLANTIC AVE					ADDRESS			
CITY-ST-ZIP	CAPE CANAVERAL, FL 3					ST-ZIP			
TITLE		Ĺ	DELETE	4.1 TI			☐ Chang	e Addition	
NAME				4. 2 N	AME				
STREET ADDRESS				4.3 ST	REET	ADDRESS			
CITY-ST-ZIP				4.4 CI	TY-S	T-ZIP			
TITLE			DELETE	5.1 11	TLE		☐ Chang	e 🔲 Addition	
NAME				5.2 NA	ME				
STREET ADDRESS				5.3 ST	REET	ADDRESS			
CITY-ST-ZIP			7 00,000	5.4 CI		T- ZIP	T &	a ladastac	
TITLE		L.] DELETE	6.1 TI			∟ Chang	e L_] Addition	
NAME				6.2 NA					
STREET ADDRESS						ADDRESS		ļ	
CITY-ST-ZIP	artifu that the information equation w	ith this films dose	not qualify to	6.4 Cl			Section 119.07(3)(i), Florida Statutes. I further certify that t	he information	
In Thereby C	army and the information supplied wi	an and mary coes	Tot quality to		الروادات مالة لم	at was almost the	ire shall have the same legal effect as if made under eath:	that I am an	

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 ar officer or director of the corporation or the receiver or trusted 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.