

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morikam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 296116 (7)

1. Corporation Name

PILOT HOUSE BAR AND COCKTAIL LOUNGE, INC.



Principal Place of Business

4909 N W 36TH STREET
MIAMI SPRINGS FL 33166

Mailing Address

4909 N W 36TH STREET
MIAMI SPRINGS FL 33166

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26 20191 E. COUNTRY CLUB DR.

Suite, Apt. #, etc.

27 1611

City & State

28 AVENTURA FL

Zip

29 33180

Country

30

9. Name and Address of Current Registered Agent

~~KULLA, ANITA
11 ISLAND AVE
APT. 2003
MIAMI BEACH FL 33139~~

3. Date Incorporated or Qualified

08/23/1965

3a. Date of Last Report

07/11/1995

4. FE Number

59-1105165

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

ANITA K. FREEDMAN

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

20191 E. COUNTRY CLUB DR. APT 1611

83

84 City

AVENTURA

FL

85 Zip Code

33180

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

Anita K. Freedman

3-14-96

12. OFFICERS AND DIRECTORS

TITLE PT ☒ DELETE

NAME KULLA, ANITA
STREET ADDRESS 11 ISLAND AVE #2003
CITY-STATE-ZIP MIAMI BEACH FL

TITLE DV ☒ DELETE

NAME KULLA, ANITA
STREET ADDRESS 11 ISLAND AVE #2003
CITY-STATE-ZIP MIAMI BEACH FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(c), 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.

SIGNATURE:

Anita K. Freedman

3-14-96

CR2E034 (12/95)