## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 21, 2008 8:00 am Secretary of State 04-21-2008 90059 012 \*\*\*158.75

DOCUMENT # 432061							<b>A</b> .	1 04-21-2008 90039 012 1138.73				
1. Entity Name STRATFORD BAR AND RESTAURANT, CORP.												
Principal Plac	ailing Address	Address										
2910 HOLLYWOOD BLVD. HOLLYWOOD, FL 33020-4208				2910 HOLLYWOOD BLVD. HOLLYWOOD, FL 33020-4208			40073	3865				
2. Principal Place of Business - No P.O. Box #				3. Mailing Address 1447 Harding Street								
Suite, Apt. #, etc.				Suite, Apt. #, etc.			04182008	Chg-P	CR2E	)34 (12/06)		
City & State				City & State Hollywood		4. FEI Numb				pplied For ot Applicable		
Zip Country			Zip Cou 33019 US		try	5. Certificate of Status Desired		XX	XX \$8.75 Additional Fee Required			
6. Name and Address of Current				tered Agent		Name	7. Name and	Address of New R	egistered	Agent		
ROPER, JR. GUY F. 2910 HOLLYWOOD BLVD. HOLLYWOOD, FL						Street Address (P.O. Box Number's Not Acceptable)  1447 Harding Street						
	1					City	TITLO D d	,	FL	Zip Coo	de 010	
	named entitions of regist			ourpose of changing its		ed office or regi	<u>ywood</u> istered agent, or bo	oth, in the State of Flo	rida. I am	familiar with		
After Ma		FEE IS \$150.00 8 Fee will be \$55		9. Election Campa Trust Fund Con	tribution.	~ ~	\$5.00 May Be Added to Fees					
10.	PD	OFFICERS A	ND DIREC	Delete Delete	11.		ADDITIONS	/CHANGES TO OFFI	CERS ANI	Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	SULLIVAI 17200 SV	N, RICHARD / 59TH CT RANCHES, FL 333	31	Delete	NAM STRE					onengo		
THTLE NAME STREET ADDRESS	ST ROPER,G 1447 HAF	RDING ST		☐ Defete	1	E ET ADDRESS				☐ Change	Addition	
CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP	HOLLYW	DOD, FL		☐ Delete	TITLE NAM STRE	!				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAM STRE	:				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete						☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete						☐ Change	Addition	
indicated of the cor	l on this repo rooration or tl	rt or supplemental repo he regeiver or trustee o	ort is true : Impowere	iling does not qualify f and accurate and that d to execute this repor Il other like empowered	my signa t as requi	ture shall have t	the same legal ette	ct as it made under d	hath: that I	am an office	r or director	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR