FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 FLORIDA DEPARTMENT OF STATE CORPORATION

ANNUAL REPORT

1998

Principal Place of Business

VERO BEACH FL 32962

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

SIGNATURE:

685 SOUTH US 1

21

22



Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 444661 FAT BOYS OF INDIAN RIVER COUNTY, INC.

(3)

26

Mailing Address 685 SOUTH US 1 VERO BEACH FL 32962

2a. Mailing Address

City & State

Suite, Apt. #, etc.

FILED Feb 05 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

Not Applicable

3. Date Incorporated or Qualified 01/23/1974

59-1509703

5. Certificate of Status Desired

4. FEI Number

City & State						City & State				6. Election Campaign Financing \$5.00 May Be	
23			_		28		· ·			Trust Fund Contribution Added to Fees	
_	ĺρ		_	untry	\vdash	Zip	<u> </u>	ıntry		8. This corporation owes or has paid the carrent year intangible	
24 25 29 30 30 9. Name and Address of Current Registered Agent								Personal Property Tax due June 30. Yes No			
									Name	10. Name and Address of New Registered Agent	
GIANNAMORE, LARWIN								"	Name	34 16	
825 26TH AVE.							82	Stree	reet Address (P.O. Box Number is Not Acceptable)		
VERO BEACH FL 32962								83			
							55				
								84	City	FL T T T T T T T T T	
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 visco of printed refine of registered agent and title if applicable. (NOTE: Registered Agent signature required when relocation) DATE											
Signature Food of Printed Table of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12											
TITLE		Р		CIT IGENS AND	וועסו	DELETE	111	T! F		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
NAME		GIANNA	MORE.	LARWIN			1.2 N			S on ange	
	T ADDRESS	825 267						_	ADDRESS	FCC	
CITY-S		VERO B					1,4 CI				
TITLE						☐ DELETE	2.1 78		- 24	Change Addition	
NAME	i						2.2 NA	ME			
STREET	I ADDRESS						2.3 \$7	REET /	ADDRESS	ESS	
CITY - S	ST-ZIP						2. 4 C	ITY-S	T-ZIP		
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NAME							3.2 NA	ME			
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CITY - S	T-21P						4,4 CI	Y-51	- ZIP		
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CITY-S	ST- ZIP						5 4 CII	Y-ST	-ZIP		
TITLE	ŀ					DELETE	6.1 TIT	LE		☐ Change ☐ Addition	
NAME	j						6.2 NA	ME			
STREET	ADDRESS						6.3 ST	REET A	DDRESS	ESS	
CITY-S			inte :	Alexander (Control of the Control of	41-1- ***		6.4 CIT				
14. I 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?											