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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 462984

(6)

CARL'S PIER I, INC.

FILED Mar 30 1998 8:00am Secretary of State

						-				
Principal Place	of Business	Mailing Address						• •	., ., ., ., .,	
3840 ELLIS RO)	3840 ELLIS RD								
FT. MYERS FL	. 33905	FT MYERS FL 33905	_			DO NOT WRITE IN THIS SPACE				
US		US	US			3. Date Incorporated or Qualified				1
						10/09/1974				
9 Principal Pl	ace of Business	2a. Mailing Address	a. Mailing Address						pplied For	1
21	ace of Dosinoss	26	h						ot Applicable	1
Suite, Apt. 6	t. etc.		Suite, Apt. #, etc.				$\overline{}$		Additional	1
22	.,	ļ ,	27			5. Certificate of Status Desired			equired	1
City & State	9	City & State				6. Election Campaign Financing \$5.00			May Be	1
23		28			Trust Fund Contribution			• • •	Added to Fees	
Zip	Country			Country 8. This corporation owes or has paid the cu			d the curre	irrent year Intangible		
24	25	29	30			Personal Property Tax due June	30. <u> </u>	Yes	□ No]
	g. Name and Address of Curr	rent Registered Agent				10. Name and Address of New Reg	istered A	gent		
FRK	CKE, CARL			81	Name					l
3840 ELLIS RD				82	Street Addre	ddress (P.O. Box Number is Not Acceptable)				1
	MYERS FL 33905			0.000,7.55			- ,]
• • •				83						
				84	City			85 Zip	Code	┨
				-	,		FL	11		l
11, Pursuant t	to the provisions of Sections 607.0	0502 and 607.1508, Florida State	utes, the al	ove	named corp	oration submits this statement for the pu on's board of directors. I hereby accep	rpose of	changing	its registered	1
office or re	egistered agent, or both, in the Str m tamiliar with, and accept the ob-	ate of Florida. Such change was Jugations of Section 607.0505. F	s authorize Florida Stat	d by lutes.	the corporati	on's board of directors. I hereby accep	i ine appo	intment as	s registered	1
		3								
SIGNATURE	Signature, typed or printed name of registered	agent and (the if applicable (NC	OTE Registere	d Ager	nt signature require	ed when reinstating)	DATE			6
12.	OFFICERS A	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC				10/01/
TITLE	P	☐ DELETE	1.1 TI	TLE			Į.	Change	Addition Addition	т.
NAME	FRICKE, CARL		1.2 N	AME						5
STREET ADDRESS	3840 ELLIS RD		1.3 S1	TREET A	address					R2E034
CITY - ST - ZIP	FT. MYERS FL		1.4 CI	TY-ST	- ZIP				TA LES	ļķ
TITLE	S	L.) DELETE	2.1 16	TLE			Į.	Change	Addition	1
NAME	FRICKE, AMBER		2.2 N	AME	·					1
STREET ADDRESS	3840 ELLIŞ RD		2.3 ST	FREET A	ADDRESS		•			
CITY+ST-ZIP	FT. MYERS FL			ITY-S	T-ZIP			<u> </u>	1 1 1 1 1 1 1 1	-
TITLE		DELETE	3.1 10	TLE				Change	Addition	
NAME			3.2 N	AME						
STREET ADDRESS			3.3 \$	TREET	ADDRESS					
CITY-ST-ZIP			3.4. 0	ITY-S	T-ZIP					1
TITLE		☐ DELETE	4.1 Ti	TLE				Change	Addition	
NAME			4.2 N	IAME						
STREET ADDRESS			4.3 S	TREET.	ADDRESS					
CITY-ST-ZIP			4.4 C	ITY - \$1	r-zip					_
TITLE		☐ DELETE	5.1 11	ITLE				Change	Addition	ŀ
NAME			5.2 N	AME						
STREET ADDRESS			5.3 \$	TREET.	ADDRESS					
CITY-ST-ZIP			5.4 C	ITY-\$1	T- ZIP					1
TITLE		☐ DELETE	6.1 TI	TLE				☐ Change	Addition	
NAME			6.2 N	AME	ŀ					
STREET ADDRESS			6.3 S	TREET	ADDRESS					
CITY-ST-ZIP			6.4 C	1TY-\$1	T- 21P				·	1
	portific that the information cumples	d with this filing done not qualify	for the ex-	emol	ion stated in	Section 119.07(3)(i), Florida Statutes, I	further cer	dify that th	e information	1

iny for the exemption stated in Section 119.07(3)(i), Florida Statufes , Turther Cerrity that the Informatic Accurate and that my signature shall have the same legal effect as if made under oath; that I am an ollo execute this report as required by Chapter 607, Florida Statutes; and that my name appears in indicated on this annual report or suppl officer or director of the corporation or Block 12 or Block 13 if changed, or or

SIGNATURE: