

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

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Feb 10, 1999 8:00am
Secretary of State

02-10-1999 90039 020 *****150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 545278

1. Corporation Name

NEARLY NEW RESTAURANT EQUIPMENT & SUPPLIES, INC.

Principal Place of Business

301 S. PINELLAS AVENUE
TARPON SPRINGS FL 34689

Mailing Address

301 S. PINELLAS AVENUE
TARPON SPRINGS FL 34689

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/13/1977

4. FEI Number

59-1796343

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 owes the current year Intangible
Personal Property Tax.

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JEAN-PERRIE, FLORENCE
301 S. PINELLAS AVENUE
TARPON SPRINGS FL 33589

81 Name

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

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

V
NAME
GEORGEADES, PAUL
STREET ADDRESS
301 S. PINELLAS AVENUE
CITY-ST-ZIP
TARPON SPRINGS FL

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

P
NAME
GEORGEADES, JAMES
STREET ADDRESS
301 S. PINELLAS AVENUE
CITY-ST-ZIP
TARPON SPRINGS FL

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

STD
NAME
PERRIE, FLORENCE J.
STREET ADDRESS
301 S. PINELLAS AVENUE
CITY-ST-ZIP
TARPON SPRINGS FL

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

D
NAME
GEORGEADES, IRENE
STREET ADDRESS
301 S. PINELLAS AVENUE
CITY-ST-ZIP
TARPON SPRINGS FL

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/20/99 (727)-934-5063

CR2E034 (11/98)