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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

TITLE

NAME

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STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

LEWIS, GEORGE

**54 COREY AVE** 

ST PETE BCH FL

PHILLIPS, JOHN

CHANDLER, RICHARD 54 COERY AVENUE

ST. PETERSBURG BEACH FL

SRVP

SRVP

690613

(5)

DELETE

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DELETE

LEVEROCK'S SEAFOOD HOUSE, INC.

FILED
Apr 22 1998 8:00am
Secretary of State

Change

Change

10000249609<sup>[Change]</sup> -04/22/98-01022-003

\*\*\*900.00

Addition

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Addition

.22

Addition

Principal Place	e of <b>B</b> usiness	Mailing Address					
7000 U.S. 19 P.O. BOX 681 ST. PETERSBI	P.O. BOX 66159	00 U.S. 19 (PINELLAS PARK) D. BOX 66159 . PETERSBURG FL 33736		DO NOT WRITE IN THIS SI	PACE		
					<ol> <li>Date Incorporated or Qualified</li> <li>06/17/1981</li> </ol>		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For		
21		[26]		59-2101576	Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip <b>29</b>	Country 30		8, This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
g, Name and Address of Current Registered Agent				1 Name	10. Name and Address of New Registered Agent		
ENGLANDER, LEONARD S. 6666-22ND AVENUE NORTH 5959 CENTRAL AVENUE, SUITE 201 ST. PETERSBURG FL 33710			8	82 Street Address (P.O. Box Number is Not Acceptable)  83  84 City 85 Zip Code			
•					FL	85 Zip Code	
l <b>office</b> or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig	eol Florida. Such change was i	authorized	by the corpora	rporation submits this statement for the purpose of a ation's board of directors. I hereby accept the appo	changing its registered intiment as registered	
	Signature, typed or printed numeral registered age			Agent signature requ	ured when reinstating) DATE		
12. OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CEO	☐ DELETE	1.1 NTL	€	1	Change Addition	
NAME	STROSS, JOHN E.		1.2 NAN	!E			
STREET ADDRESS			1.3 \$1R	EE1 ADDRESS			
CITY-ST-ZIP			1.4 CITY	' - S1 - ZIP			
TITLE	<b>SDT</b> DELETE		2.1 1111	£	☐ Change ☐		
NAME	TAPPAN, RICHARD A.		2.2 NAN	15			
STREET ADDRESS	11185 9TH ST. E.		2.3 S1R	EE1 ADDRESS			
CITY-ST-ZIP	TREASURE ISLAND FL		2. 4 CIT	Y - ST - ZIP			

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 suppliermental 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 of 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 ou an attachment with the fidness.

3.1 TITLE

**3.2 NAME** 

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

3.3 STREET ADDRESS

4.3 STREET ADDRESS 4.4 CITY - ST- ZIP

5.3 STREET ADDRESS

5.4 OTY - ST - 7IP

3.4. CITY - ST- ZIP