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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 694368

1. Corporation Name

Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90077 028 ***150.00

EAT OUT CORPORATION							
					THE REPORT OF THE PROPERTY OF	E ALLEK LEKI ALAK ÖLÜZI OLDIK	AKEK ANÉK EKEK (BAK
							e a la l
Principal Place of Business Mailing Address							
21335 U.S. 19 NORTH 1580 FIFE COURT							
CLEARWATER FL 34619 DUNEDIN FL 34698				DO NOT WRITE IN THIS SPACE			=
US					3. Date Incorporated or Qualif		<u> </u>
					07/13/1981		
2 Principal P	lane of Business	2a. Mailing Address			4. FEI Number	·	Applied For
					59-2105260	-	Not Applicable
21						_ \$8.	75 Additional
22 27					5. Certifcate of Status Desired	□ F	ee Required ~
City & State City & State					6. Election Campaign Financin	g _ \$5	.00 May Be
23 DUNEDIN, PL 28					Trust Fund Contribution		Ided to Fees
Zip	Country	Zip	Country	у	8. This corporation owes the o		
24 346		29 3	0		Personal Property Tax.	☐ Ye:	s □No
	9. Name and Address of Current	Registered Agent		т.	10. Name and Address of Ne	w Registered Agent	
voi	NO CARVIW		81	Name			1
LYONS, GARY W.			82	Street Addr	ess (P.O. Box Number is Not Acce	ptable)	
311 SOUTH MISSOURI AVENUE					-		
CLE	ARWATER FL 33516		83	· .			
	• •		84	City		85	Zip Code
·				1 .		FL °	
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes of Florida, Such change was auti	, the abou	re-named corporation	oration submits this statement for t on's board of directors. I hereby ac	he purpose of changi cept the appointment	ng its registered as registered
agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State or im familiar with, and accept the obligat	ions of, Section 607.0505, Florid	la Statute	s.			ĺ
SIGNATURE							}
	Signature, typed or printed name of registered agent			ent signature require	ADDITIONS/CHANGES TO	DATE	ECTORS IN 12
12.	OFFICERS ANI	D DIRECTORS DELETE	13.		ADDITIONS/OFFARIOLS TO	□ Ch	
TITLE	ABDELHAK, BRUCE		1.2 NAME			_	ř –
NAME	1580 FIFE COURT		1	TADODESS			
STREET ADDRESS	DUNEDIN FL		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP				
CITY-ST-ZIP			2.1 TITLE	51-ZIF		[] Ch	ange Addition
			2.2 NAME			_	, –
NAME	1580 FIFE COURT	مانوند سارو دروست م حوده در	1	T ADDRESS	والمستعدد المستعدد المستعدد والمستعدد المستعدد ا		
STREET ADDRESS	DUNEDIN FL		2.4 CITY-	}	The second secon	ed 2	
CITY-ST-ZIP TITLE			3.1 TITLE	31-21		□ Ch	ange Addition
NAME			3.2 NAME				
STREET ADDRESS	{		3.3 STREE	ET ADDRESS			
CITY-ST-ZIP			3.4. CITY-				
TITLE		□ DELETE	4.1 TITLE			□ Ct	ange Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY-				
TITLE		☐ DELETE	5.1 TITLE				ange
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	ET ADORESS			}
CITY-ST-ZIP			5.4 CITY-	ST-ZIP		r	
TITLE							ange Addition
i		☐ DELETE	6.1 TITLE			<u></u>	ange
NAME		☐ DELETE	6.2 NAME			· ~	ange

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 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 on an attachment with an address, with all other like empowered. CITY-ST-ZIP

SIGNATURE

ED Bruce Abdelhak