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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 DOCUMENT # 696442

BIG PINE BALTIMORE OYSTER HOUSE, INC.

FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90155 045 ***150.00

		,						
Principal Place of Business		Mailing Address					IBII BIBII BIBII BI	EII 0(81) 100)
30720 OVERSEAS HIGHWAY		P.O. BOX 430640				·		
BIG PINE KEY FL 33043		BIG PINE KEY FL 33043				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed		
						07/28/1981		}
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Ap	plied For
21		26				59-2108505	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	\$8.75	Additional
22		27				5. Certificate of Status Desired	Fee Re	quired
City & State	ө	City & State				-6Election Campaign Financing		May Be
23		28				Trust Fund Contribution	Added t	o Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year In		MATE .
24	25	29	30			Personal Property Tax.	☐ Yes	No
	9. Name and Address of Curren	Registered Agent		81	Name	10. Name and Address of New Registered	Agent	
HANK	KINS FIELDER, LYNNE ESQ.			"	Hairie			
	OVERSEAS HIGHWAY			82	Street Addre	ss (P.O. Box Number is Not Acceptable)		
	ARLOAF KEY FL 33042			83				
Ç.	ALCON NET LE GOOTE			63				
				84	City	Fl	85 Zip (Code
44 Pursuant	to the provinces of Sections 607 050	2 and 607 1508 Florida Statu	ites the ai	L_L hove-	named como	ration submits this statement for the purpose of	f changing its	registered
office or r	egistered agent, or both, in the State (of Florida. Such change was a	authorized	i by ti	ne corporatior	n's board of directors. I hereby accept the appo	intment as re	gistered
agent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505, Fi	onda Stati	utes.				
SIGNATURE	Signature, typed or printed name of registered agen	and title if applicable. (NOT	E: Registered	Agent	signature required	when reinstating) DATE		—— Ì
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	STD	☐ DELETE	1.1 TI	1.1 TITLE			Change	☐ Addition
NAME.							_	
	HENGST, KIM C.		1.2 NA	ME			_	
STREET ADDRESS	HENGST, KIM C. 30720 OVERSEAS HIGHWAY	_ otter			ADDRESS			
STREET ADDRESS CITY-ST-ZIP	30720 OVERSEAS HIGHWAY	_ Otter	1.3 ST		1	·		, radiasi.
	· · · · · · · · · · · · · · · · · · ·	DELETE	1.3 ST	TY-ST-		·	Change	Addition
CITY-ST-ZIP	30720 OVERSEAS HIGHWAY BIG PINE KEY FL PD		1.3 ST 1.4 CF	TY-ST- TLE			Change	
CITY-ST-ZIP TITLE NAME	30720 OVERSEAS HIGHWAY BIG PINE KEY FL PD HENGST, DANIEL F.		1.3 ST 1.4 CF 2.1 TF 2.2 NA	TY-ST- TLE ME			Change	
CITY-ST-ZIP TITLE NAME	30720 OVERSEAS HIGHWAY BIG PINE KEY FL PD HENGST, DANIEL F.		1.3 ST 1.4 CF 2.1 TH 2.2 NA 2.3 ST	TY-ST- TLE ME	-ZIP ADDRESS		. Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	30720 OVERSEAS HIGHWAY BIG PINE KEY FL PD HENGST, DANIEL F. 30720 OVERSEAS HIGHWAY		1.3 ST 1.4 CF 2.1 TH 2.2 NA 2.3 ST	TY-ST- TLE AME TREET A	-ZIP ADDRESS		☐ Change	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	30720 OVERSEAS HIGHWAY BIG PINE KEY FL PD HENGST, DANIEL F. 30720 OVERSEAS HIGHWAY	☐ DELETE	1.3 ST 1.4 CF 2.1 TH 2.2 NA 2.3 ST 2.4 C	TY-ST- TLE AME TREET A TTY-ST-	-ZIP ADDRESS			Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	30720 OVERSEAS HIGHWAY BIG PINE KEY FL PD HENGST, DANIEL F. 30720 OVERSEAS HIGHWAY	☐ DELETE	1.3 ST 1.4 CF 2.1 TH 2.2 NA 2.3 ST 2.4 C 3.1 TH 3.2 NA	TY-ST- FLE AME TREET A TTY-ST- TLE AME	-ZIP ADDRESS			Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	30720 OVERSEAS HIGHWAY BIG PINE KEY FL PD HENGST, DANIEL F. 30720 OVERSEAS HIGHWAY	☐ DELETE	1.3 ST 1.4 CF 2.1 TH 2.2 NA 2.3 ST 2.4 C 3.1 TH 3.2 NA 3.3 ST	TY-ST- FLE AME TREET A TTY-ST- TLE AME	ADDRESSZIP ADDRESS		☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	30720 OVERSEAS HIGHWAY BIG PINE KEY FL PD HENGST, DANIEL F. 30720 OVERSEAS HIGHWAY	☐ DELETE	1.3 ST 1.4 CF 2.1 TH 2.2 NA 2.3 ST 2.4 C 3.1 TH 3.2 NA 3.3 ST	TY-ST- TLE AME TY-ST- TLE TY-ST- TLE AME TY-ST- TLE TREET /	ADDRESSZIP ADDRESS			Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	30720 OVERSEAS HIGHWAY BIG PINE KEY FL PD HENGST, DANIEL F. 30720 OVERSEAS HIGHWAY	☐ DELETE	1.3 ST 1.4 Cr 2.1 Tr 2.2 NA 2.3 ST 2.4 C 3.1 Tr 3.2 NA 3.3 ST 3.4 Cr	TY-ST- TLE AME TY-ST- TLE AME TREET A TLE TREET A TREET A TREET A TREET A	ADDRESSZIP ADDRESS		☐ Change	Addition
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CITY-ST-ZIP TITLE NAME STREET ADDRESS	30720 OVERSEAS HIGHWAY BIG PINE KEY FL PD HENGST, DANIEL F. 30720 OVERSEAS HIGHWAY BIG PINE KEY FL	☐ DELETE	1.3 ST 1.4 CF 2.1 TIT 2.2 NA 2.3 ST 2.4 C 3.1 TIT 3.2 NA 3.3 ST 3.4 CF 4.1 TIT 5.2 NA 5.3 ST 5.4 CF 6.1 TIT	TY-ST- TLE AME TREET / TILE AME TREET / TILE AME TY-ST- TLE AME TY-ST- TLE TY-ST- TLE TY-ST- TLE TY-ST- TLE	ADDRESSZIP ADDRESSZIP ADDRESSZIP ADDRESSZIP ADDRESS	es Gr	Change	Addition Addition
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section indicated on this annual report or supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and that my signature should be supplemental annual report is true and accurate and the supplemental annual report is true and accurate and the supplemental an

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statutes. I further certify that the information gal effect as if made under oath; that I am an Florida Statutes; and that my name appears in

CITY-ST-ZIP