FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999

HOPS OF CORAL SPRINGS, LTD.

Country

TTCA



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT# A95000000162

98 DEC 29 PM 3: 15

 $\mathbf{x}\mathbf{x}$

8. Make check payable to: Dept. of State (See reverse side for fee information)

Mailing Address	Principal Office Address	3. Date Formed or Registered	5a. Capital Contributions as Shown on record,
C/O HOPS GRILL & BAR. INC.	C/O HOPS GRILL & BAR. INC.	02/01/1995	\$25,000.00
-3030 N. ROCKY POINT DRIVE WEST. SUITE 650-	**************************************	3a. Date of Last Report '	Ψ20,000.00
TAMPA FL-38007	-TAMPA-FL 33607	01/14/1998 '	5b. Amount of Capital
	<u> </u>	4. State or Country of Formation	Contributions in FLORIDA to date:
2. Mailing Address	2a. Principal Office Address	FL	#35 000 00
2701 N. etc. Rocky Point Dr.	Suie, Apt. #, etc. Rocky Point Dr.	<u> </u>	\$25,000.00
·		6. FEI Number	Applied For
Suite 300	<u> </u>	- 59-3294665	Not Applicable

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office	
CORPORATION SERVICE COMPANY 1201 HAYS STREET	Name	203.75
	Street Address (P.O. Box Number Is Not Acceptable)	875
LLAHASSEE FL 32301-2525	Suite, Apt. #, etc.	
	City	Zíp Code

Country

Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, 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 its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)_

DATE

7. Certificate of Status Desired

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE

11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/
HOPS GRILL & BAR, INC.	3030 NROCKY POINT-D-	TAMPA FL 33607	P97000009985
	2701 N. Rocky Pt. I Suite 300	sooooa -01/0	27301857 5/9301038013 272.50 ****272.50

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicate this annual report is true and accurate appropriate Thature shall have the sam rgal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as require

SIGN	IATU	IRE
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Terence Grerenzi, Typed or Printed Name of General Partner Signing Form

813<u>-2</u>82<u>-9</u>350

\$8.75 Additional Fee Required

America's Original Microbrewery Restaurant

Hops Restaurant • Bar & Brewery 2701 N. Rocky Point Dr., Suite 300 Tampa, FL 33607 Telephone: 813-282-9350

Facsimile: 813-282-9451

December 22, 1998

VIA AIRBORNE EXPRESS

Florida Department of State Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Attention: Diane Cushing, Corporate Specialist

Re: 1999 Annual Report

Hops of Coral Springs, Ltd. Ref. #: A95000000162

Dear Ms. Cushing:

Enclosed please find the following documents:

1. Executed Annual Report

2. Check in the total amount of \$272.50, which represents \$175.00 for the Filing Fee, \$88.75 for the Supplemental Filing Fee and \$8.75 for the issuance of the Certificate of Status.

Please file the enclosed Annual Report and forward to me the Certificate of Status upon completion. Thank you for your assistance with this filing.

Sincerely,

Susan M. Bohne Los Legal Counsel

SB/cd Attachments