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

LIMITED PARTNERSHIP ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 DEC 29 PM 3:15

1. Name of Limited Partnership

1a. DOCUMENT # A96000000046

HOPS OF ALTAMONTE SPRINGS, LTD.

Mailing Address	Principal Office Address
C/O HOPS GRILL & BAR, INC. ~~3030 N. ROCKY POINT DR. WEST, STE. 650~~ ~~TAMPA FL 33607~~	C/O HOPS GRILL & BAR, INC. ~~3030 N. ROCKY POINT DR. WEST, STE. 650~~ ~~TAMPA FL 33607~~
2. Mailing Address: 2701 N. Rocky Point Dr.	2a. Principal Office Address: 2701 N. Rocky Point Dr.
Suite, Apt. #, etc.: Suite 300	Suite, Apt. #, etc.: Suite 300
City & State: Tampa, FL	City & State: Tampa, FL
Zip: 33607 Country: USA	Zip: 33607 Country: USA

3. Date Formed or Registered: 01/05/1996

3a. Date of Last Report: 01/14/1998

4. State or Country of Formation: FL

5a. Capital Contributions as Shown on record.: $1,000.00

5b. Amount of Capital Contributions in FLORIDA to date: $1,000.00

6. FEI Number: 59-3353730 ☐ Applied For ☐ Not Applicable

7. Certificate of Status Desired ☒ $8.75 Additional Fee Required

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

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525	Name: 141.25 Street Address (P.O. Box Number Is Not Acceptable): 8.75 Suite, Apt. #, etc.: City: FL Zip Code:

10a. 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 _____

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/ Document Number
HOPS GRILL & BAR, INC.	~~3030 N. ROCKY POINT D~~ 2701 N. Rocky Pt. Dr. Suite 300	TAMPA FL 33607 100002731101--7 -01/05/99--01092--007 ****150.00 ****150.00	P97000009985

dcc (cw)

CR2E003 (8/98)

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 indicated on this annual report is true and accurate and that my signature shall have the same legal 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 required by chapter 620, Florida Statutes.

SIGNATURE Terence Terenzi DATE 12/22/98

Typed or Printed Name of General Partner Signing Form: Terence Terenzi, CFO Daytime Telephone Number: 813-282-9350

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 Altamonte Springs, Ltd.
Ref. #: A96000000046

Dear Ms. Cushing:

Enclosed please find the following documents:

1. Executed Annual Report
2. Check in the total amount of **$150.00**, which represents $52.50 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
Legal Counsel

SB/cd
Attachments