**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F95000005268

1. Corporation Name

CRABBY BILL'S RESTAURANTS, INC.

Principal	Disease	-4 D	

101 PHILIPPE PKWY SAFETY HARBOR FL 34695

Suite, Apt. #, etc.

2. Principal Place of Business\*

Mailing Address

101 PHILIPPE PKWY SAFETY HARBOR FL 34695

2a. Mailing Address

Suite, Apt. #, etc.

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## FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90186 023 \*\*\*150.00



DO NOT WRITE IN THIS SP	ACI
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Applied For

\$8.75 Additional

Not Applicable

3. Date Incorporated or Qualifed 10/11/1995

4. FEI Number

59-3330216

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City & Sta	ite	City &	State				6. Election Campaign Financing Trust Fund Contribution	Q	\$5.00 Added t		
Zip	Country	Zip	p Country				This corporation owes the current year Intangible				
24	25	29	30			Personal Property Tax.			Yes	□No	
	9. Name and Address of Current	Registered A	gent				10. Name and Address of New Reg	jistered	Agent		
				1	81	Name				-	
PARKER, GERALD C 101 PHILIPPE PARKWAY, STE 300 SAFETY HARBOR FL 34659					82 Street Address (P.O. Box Number is Not Acceptable)						
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				ļ.	83					-1.	
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					84	City		FL	85 Zip C		
office or	t to the provisions of Sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the obligati	f Florida, Such	n change was aut	horized I	by t	the corporation	ration submits this statement for the pu i's board of directors. I hereby accept the	rpose of he appoi	changing its ntment as rec	registered gistered	
SIGNATURE											
	Signature, typed or printed name of registered agent		<u></u>	<del>-</del>	gent	signature required		DATE			
12.	OFFICERS AND	DIRECTORS	DELETE	13.	_		ADDITIONS/CHANGES TO OFFIC	ERS AN			
TITLE			□ pere≀e	1.1 TITU		Ì			☐ Change	Addition	
NAME	PARKER, GERALD	100		1.2 NAV		}					
STREET ADDRESS		SUU .		•		ADDRESS					
CITY-ST-ZIP	SAFETY HARBOR FL 34695			1.4 CITY	_	-ZIP					
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.NAME .			<del></del>	2.2 NAM		-	,				
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NAME				3.2 NAM	ſΕ	İ					
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NAME				5.2 NAM	Œ						
STREET ADDRESS				5.3 STRE	EETA	ADDRESS				{	
CITY-ST-ZIP	<u> </u>			5.4 C(1Y	·st-	ZIP					
TITLE			DELETE	6.1 TITLE	E	<del></del>			Change	Addition	
NAME	1			6.2 NAM	E			-		1	
STREET ADDRESS	}			6.3 STRE	EET A	ADDRESS					
CITY-ST-ZIP				6.4 CITY	-ST-	ZIP				İ	
	actifuthat the information conclined with	this filing does	a not qualify for th		_		ction 119 07/3Vi) Florida Statutes I fu	<del></del>	E . 45 40		

indicated on this annual report or supplied with ansilling 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 or 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 address, with all other like empowered.

SIGNATURE: