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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F9600003004 (6) 1. Corporation Name

**BOB'S EUROPEAN IMPORTS INC.** 

## FILED Apr 08 1997 8:00am Secretary of State

Principal Place	CTR. 201 N WALNUT ST	Mailing Address 3 CHRISTINA CTR. 201 WILMINGTON DE 1980					
					3. Date Incorporated or Qualified 06/13/1996	3a. Date of Last	Report
2. Principal P 21	lace of Business	2a. Mailing Address 26			4. FEI Number 65-0657252		Applied For Not Applicable
27			, Apt. #, etc.		5. Certificate of Status Desired		Additional Required
City & State	e	City & State			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Z(p)	Country 25	Ζίρ <b>29</b>	Country 30		8. This corporation has liability for intangible tay under s. 199.032, Florida Statutes Yes No		
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Reg	gistered Agent	
PRO	CHOT, ROBERT		8	1 Name			1
2903-B 9TH ST W Bradenton Fl 34205			6	2 Street Add	ress (P.O. Box Number is Not Acceptab	le)	
}			8 (	3			1
			8	4 City		FL 85 Zir	Code
11. Pursuant office or ragent ha	m familiar with, and accept the oblig	gations of, Section 607.0505	i, Florida Statut	<del>0</del> 8.	poration submits this statement for the p tion's board of directors. I hereby accep		s registered
	Signature, typed or printed name of registered ag			geni signature requ	lred when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	DC IN 12
12.	DCPV	D DIRECTORS  DELETE	13.		ADDITIONS/CHANGES TO OFFIC	Change	
NAME	PROCHOT, ROBERT F		1.2 NAM	,		L. J Onlings	
STREET ADDRESS	2903-B 9TH ST W			ET ADDRESS	. Å		1
CITY-ST-ZIP	BRADENTON FL 34205		1.4 CITY				
TITLE	ST DELETE		2.1 TiTL			☐ Change	Addition
NAME	PROCHOT, ROBERT F		2.2 NAM	Ì			
STREET ADDRESS	2903-B 9TH ST W		2.3 STRE	ET ADDRESS			
CHY-S1-ZIP	BRADENTON FL 34205		2.4 CITY	-ST-ZIP			
TULE		☐ DELETE				☐ Change	Addition
NAME			32 NAM	E			
STREET ADDRESS			3.3 STRE	et address			
CITY-ST-ZIP			3.4. CITY	-ST-ZIP			
THILE		☐ DELETE	4.1 TiTLI	:		☐ Change	Addition
NAME			4. 2 NAN	SE .			
STREET ADORESS			4.3 STRE	ET ADDRESS			ì
City-St-ZiP		[ ] No. 222	4.4 CiTY				12.00
TITLE		DEFELE				Change	Addition
NAME			5.2 NAM				
STHEFT ADDRESS				ET ADDRESS			
CiTy+S1-7iP		Paciett	5.4 CITY		700	[ ] 6b	Additor
Tillf		☐ DELETE		1		Change	Addition
NAME			62 NAM	- 1			
STREET ADDRESS				ET ADDRESS			ł
CITY-SI-7P			6.4 CITY	-ST-ZIP			

14. I do 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 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 an address.

SIGNATURE:



941-749-1346