Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90132 006 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G24055

1. Corporation Name

GABBY'S	S GOODTIME TAVERN, INC.										
Principal Place	e of Business	— Ma	iling Address					I BOL BOLBI BILBI BILI QIYLI	Albii Bibii Aibii Bi	3 11 818 11 1 90 1	
5304 66TH STREET. NORTH ST. PETERSBURG FL 33709			5304 66TH STREET. NORTH ST. PETERSBURG FL 33709			DO NOT WRITE IN THIS SPACE					
							3. Date Incorporated or 02/15/1983	Qualifed			
2 Principal P	lace of Business	2a.	Mailing Address				4. FEI Ni mber		Apr	tied For	
24		26	3				59-2293809		Not	Applicable	
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.				5. Certifcate of Status E	Desired [\$8.75 A		
City & Stat	e	28	City & State		_		6. Election Campaign F	-	\$5.00 h	•	
Zip	Courtry	20	Zip	Cou	intry		8. This or rporation owe		ntanzible		
24	25	29		30	-		Personal Property Ta	-		IJNo	
	9. Name and Address of Current		tered Agent	<u> </u>	Ī		10. Name and Address	of New Registered	Agent		
					81	Name					
	AULT, LOIS A.				82	Street Acd	ress (P.O. Box Number is No	of Acceptable)			
	66TH STREET, NORTH					0.0007700					
ST. I	PETERSBURG FL 33709				83						سند
		_			84	City			85 Zip C	ode	
						•		FI	L 1 1 1 1		ĺ
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State or familiar with, and accept the obligation	Florid	a. Such change was a	uthorized	ו עט ב	the corporati	oration submits this stateme on's board of directors. I hen	ent for the purpose of eby accept the app:	if changing its r pintment as reg	agistered Istered	
SIGNATURE		1 17 1 17	NOT	Pagistand	(A cont	Colomot up 100 up	d when reinstating)	DATE			_ ا
12.	Signature, typed or printed nai ne of registered agent OFFICERS AND		appicable (NOTE	. Registered	Agent	Signature require	Much temperatural				41/08
TITLE	PSD	- 0111-	CTORS				ADDITIC NS/CHANGE	S TO OFFICERS A	ND DIRECTOR	RS IN 12	
NAME			CTORS DELETE	13.	TLE		ADDITIC NS/CHANGE	S TO OFFICERS /	ND DIRECTO! ☐ Change	RS IN 12	5
				13.			ADDITIC NS/CHANGE	S TO OFFICERS /			_
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STREET ADDRESS	HENAULT, LOIS A. 6515 40TH AVENUE NORTH			13. 1.1 TF 1.2 NA 1 3 ST	AME TREET	ADDRESS	ADDITIC NS/CHANGE	S TO OFFICERS /			_
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6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I 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 supplied ental annual report is true and accurate and that my signature shall have the same legal effect as if made uncer oath; that I am apport 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, with all other like empowered.

54 CITY-ST-ZIP

63 STREET ADDRESS

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRES 3

TITLE

NAME

NATURE AND TYPED OR PHINTED NAME OF SIGNING OF

DELETE

Addition

Change