

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1996.
AMOUNT DUE ON OR BEFORE 8/8/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 26 AM 8:59

DOCUMENT # **G77153** (6)

1. Corporation Name

THE FIREHOUSE BAR & GRILLE, INC.

Principal Place of Business

260 1ST AVE. SO.
ST. PETERSBURG FL 33701
US

Mailing Address

260 1ST AVE. SO.
ST. PETERSBURG FL 33701
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/04/1984

3a. Date of Last Report

06/14/1994

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23

City & State

27

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-2389298

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199 (199
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

DZEN, THOMAS P.
C/O D&B CORPORATE SERVICES INC.
5999 CENTRAL AVE., SUITE 202
ST PETERSBURG FL 33710

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

194 - 115th AVE NE

83

84 City

St. Pete

FL

85 Zip Code

33716

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Thomas P. Dzen
Signature (typed or printed name of registered agent and fee application)

THOMAS P. DZEN

(NOTE: Registered Agent signature required when re-registering)

DATE

6/14/95

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VP

BRAINARD, SCOTT
1460 PINELLAS POINT DRIVE
ST. PETERSBURG FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PD

DZEN, THOMAS P.
194 115 AVE NE
ST PETERSBURG FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

DT

MCCLELLAN, ANITA
500 C SANTA CRUZ PL NE
ST PETERSBURG FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

DS

BRAINARD, MAUREEN
1460 PINELLAS PT DR S
ST PETERSBURG FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D

BRAKEMAN, JAMES E.
373 6 AVE
TERRA VERDE FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

☒ Change ☐ Addition

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☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 007, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed or on an amendment with an address.

SIGNATURE:

Thomas P. Dzen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THOMAS P. DZEN

6/14/95

Date

(813) 792-7800

Daytime Home #