

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 28 PM 2:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **H71397** (4)
1. Corporation Name
SINBAD'S RESTAURANT, INC.

Principal Place of Business Mailing Address
78 DUNLAWTON AVE. **1877 SECLUSION DRIVE**
DAYTONA BEACH FL 32124 **DAYTONA FL 32124**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **08/15/1985** 3a. Date of Last Report **03/11/1994**
4. FEI Number **59-2580876** 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
7. This corporation has liability for intangible tax under S. 190.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 **PORT ORANGE FL** 28 **PORT ORANGE FL**
24 Zip **32127** 25 Country 29 Zip **32127** 30 Country

9. Name and Address of Current Registered Agent
VAN HOLLEBEKE, HILLAIRE A., JR.
1877 SECLUSION DRIVE
DAYTONA BEACH FL 32124

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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, or 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	DECEASED ☒ Change ☐ Addition
NAME	VAN HOLLEBEKE, HILLAIRE,	1.2 NAME	
STREET ADDRESS	1877 SECLUSION DR.	1.3 STREET ADDRESS	
CITY - ST - ZIP	DAYTONA BEACH FL 32124	1.4 CITY - ST - ZIP	
TITLE	S	2.1 TITLE	V/S ☒ Change ☐ Addition
NAME	VAN HOLLEBEKE, RACHELLE	2.2 NAME	
STREET ADDRESS	4 FAIRLAKE LN.	2.3 STREET ADDRESS	
CITY - ST - ZIP	GROSSE POINTE MI	2.4 CITY - ST - ZIP	
TITLE	J	3.1 TITLE	P/T ☒ Change ☐ Addition
NAME	VAN HOLLEBEKE, HILLAIRE, JR.	3.2 NAME	
STREET ADDRESS	1877 SECLUSION DRIVE	3.3 STREET ADDRESS	
CITY - ST - ZIP	DAYTONA BEACH FL 32124	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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 119.07(3)(k), 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 its 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:

Hillaire Van Hollebeke Jr.
HILLAIRE VAN HOLLEBEKE JR.

Date

4/22/95 (904) 762-2941