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

PROFIT

Mar 02 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # H88428 BROWNIE'S BAR, INC. Principal Place of Business Mailing Address 1411 S. ANDREWS AVENUE 1411 S. ANDREWS AVENUE FORT LAUDERDALE FL 33316-1839 FORT LAUDERDALE FL 33316-1839 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/06/1985 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2608996 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 **Trust Fund Contribution** Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CRUZ. LICINIO 1411 S. ANDREWS AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33301 83 84 City 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. 2-24-98 ¿amo **SIGNATURE** ie of registered agent of little if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 SECRETARY MARIA T. CRUZ DPT DELETE TITLE 1.1 TITLE Addition Change CRUZ, LICINIO NAME 1.2 NAME 1411 S. Andrews AVE 1411 S. ANDREWS AVENUE STREET ADDRESS 1.3 STREET ADDRESS Fort-Lynderdale Fl 33316 FT LAUDERDALE FL CITY-ST-ZIP 1.4 CITY - ST- ZIP ICE PRESIDENT DELETE TITLE 2.1 TITLE Change **Addition** PAULO CRUZ NAME 22 NAME 1411 S. ANDREWS AVE STREET ADDRESS 2.3 STREET ADDRESS Ft. Lauderdale Fl 33316 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE VICE PRESIDENT TITLE 3.1 TITLE Change **Addition** LICINIO CRUZ TR. NAME 3.2 NAME 1411 S. ANDrews AVE STREET ADDRESS 3.3 STREET ADDRESS Fort LAUderal FR 33316 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE Change 41 TITLE ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 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 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 empowared 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 attroduced with an address.

FLORIDA DEPARTMENT OF STATE

FILED

7-74-01