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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 12 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H95773

(8)

OFFICE BAR & GRILL OF WEST PALM BEACH, INC.

Principal Place 4812 S. DIXIE + WEST PALM BE	HIGHWAY	4812 Ş. C	Mailing Address 4812 S. DIXIE HIGHWAY WEST PALM BEACH FL 33405-2927											
									01/23/19			Date of L 03/21/19		port
2. Principal Pl	ace of Business	2a. Mailir 26	ng Address					4.	FEI Number 59-2747					olied For Applicable
Suite, Apt. (#, elc	Suite,	Apt. #, etc.					5.	Certificate of	of Status Desire	d 🗆		.75 A	dditional quired
City & State		City &	State					1		mpaign Financi Contribution	ng 🗀		5.00 h dded to	May Be Fees
Zip	Country 25	Zip 29		30	Country			1	Florida Stat		☑ Ye	s 🔲 No		199.032,
	9. Name and Address of Curre	ent Registered	Agent			,		10.	Name and	Address of Ne	w Registe	ered Agent		
RER	ICK, DESIREE				81	Name	•	K	ERICK	1261	RFÉ -			
2963 APT	WINDSWEPT DR 203					Street	44dre	ss (P.O. Box Number is Not Acceptable						
	TANA FL 33402				83		1							
ı					84	City	W.	ρ.	Β.		· ·	FL 85	Zip C	ode
office or n	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the obti	te of Florida. Su	ch change was	s autho	rizea by	/ Ine co	d corpo rporatio	ration on's b	n submits the	is statement for actors. I hereby	the purpo accept the	ose of chan e appointm	ging its eht as r	registered egistered
SIGNATURE	Signature, typed or printed name of registered a	coul and too it made	able (NC	TE: Bao	icarrod An	ant einnah	re require	l whén	reinstating)		D.	ATE		
12.		ND DIRECTORS	····		13.	ant eith raco	ne requie			CHANGES TO			CTOR!	3 IN 12
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NAME	RERICK, DESIREE			. [1.2 NAME									
STREET ADDRESS	2963 WINDSWEPT DR APT 2	903			1.3 STREET	ADDRESS	; [
CITY-ST-ZIP	LANTANA FL			1	1.4 CiTY - S	ST-ZIP								
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NAME					6.2 NAME									
STREET ADDRESS					6.3 STREE	T ADDRESS	ŝ							

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 cytanglid, or on an attachment with an address.