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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**FILED** May 04 1998 8:00am Secretary of State

DOCUMENT # J21434 (2) 1. Corporation Name ST. JOHNS SEAFOOD & OYSTER BAR, INC.						
Principal Place of Business Mailing Address					— I KROUNIO UNIO IIDUI IIDUI OIDUU KAIK OKDI OKDIA I	IIÎNE OFDIA DIDIL ÎIÎN ÎION ION
7546 BEACH		<del>-</del>	2932 ALVARADO AVE			
JACKSONVILLE FL 32216		JACKSONVILLE FL 32217		20.1107		
}		U\$			DO NOT WRITE IN THI	S SPACE
					3. Date Incorporated or Qualified 06/25/1986	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21	26				59-2690986	Not Applicable
		Suite, Apt. #, etc.	te, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27				5. Certificate of Status Desired	Fee Required
City & State		City & State	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Ζιρ 29	¬ '		This corporation owes or has paid the or Personal Property Tax due June 30.	current year Intangible
	9. Name and Address of Currer		T		10. Name and Address of New Registers	
AKEL, DANIEL D.				1 Name		
1 INDEPENDENT DR. SUITE 2301 JACKSONVILLE FL 32202			8	82 Street Address (P.O. Box Number is Not Acceptable)		
			8	3		
			l a	4 City		85 Zip Code
			i	1	F	
11. Pursuant office or r agent. 1 a	to the provisions of Sections 607.050 registered agent, or both, in the State rm familiar with, and accept the oblig	)2 and 607.1508, Florida Statuti of Florida. Such change was a jations of, Section 607.0505, Florida.	es, the abo authorized orida Statut	ove-named corporates.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered ppointment as registered
SIGNATURE						
12.	Signature typed or printed name of registered age OFFICERS AN	ent and title if applicable (NOT)	13.	råeur siðustnis tedni	DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	1	DELETE 1,1 T		<u> </u>	7.00711011070	Change Addition
NAME	Rukab, Robert	RUKAB, ROBERT 1.24		E		3
STREET ADDRESS			1.3 STRE	ET ADDRESS		
CITY-ST-ZIP			1.4 CITY	- ST - ZIP		
TITLE	V	☐ DELETE 2.1 TII				Change Addition
NAME		RUKAB, MAURICE 22 N				
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP TITLE				(-ST-ZIP		Change Addition
NAME	PHIMAD IN A		3.1 TITLI 3.2 NAM	i		C Outlings C Worth(X)
STREET ADDRESS	ACCO ALLIADADO AUE			ET ADDRESS		
CITY+ST-ZIP	14 OVACAL MARKET			-ST-ZIP		
TITLE	8	DELETE 4.1 TH			· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME	Rukab, lori	4. 2 N		NE .		·
STREET ADDRESS	9434 GENNA TRACE	4.3 \$		ET ADDRESS		
CITY-\$T-ZIP	JACKSONVILLE FL		4.4 CITY	-ST-ZIP		
TITLE		OELETE	51 TITLE			Change Addition
NAME			5.2 NAM	E		
STREET ADDRESS			5.3 STRE			
CITY-ST-ZIP	Cr. etc		5.4 CITY			
TITLE			6,1 TITLE			☐ Change ☐ Addition
NAME			6.2 NAM			
STREET ADDRESS				ET ADDRESS		
CiTY-ST-ZIP	cedify that the information supplied w	with this filing does not qualify for		-ST-ZIP	Section 119 07(3)(i) Florida Statutes I further	certify that the information

reflect cetting that the information supplied with this litting does not quality 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 changed, or on an attachment with an address.

QN1. 272. / 107