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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

1006

	1990	UIVISION	OF CORPORATIONS			
DOCUI	MENT # J40	160 (0)			
WOR	RLD FAMOUS PIT STOP,	INC.				
Puncipal Place	of Business	Mailing Address			IPA BON GAN BIBN GA	l albi bien (151 fg)
1120 MAIN STREET DAYTONA BEACH FL 32118		1120 MAIN STRE DAYTONA BEACI				
				3. Date incorporated or Qualified 10/29/1986	3a. Date of Las	t Report 9/1995
_2. Principal Pla 21	ace of Business	2a. Mailing Address		4. FEI Number		Applied For
Suite, Apt. i	#. etc.	26 Suite, Apt. #, etc.		59-2742288	***	Not Applicable
22		27		5. Certificate of Status Desired		75 Additional ee Required
City & State)	City & State		6. Election Campaign Financing		.00 May Be
23		28		Trust Fund Contribution		ded to Fees
Ζιρ 24	Country 25	Zip	Country	8. This corporation has liability for in		rs 199.032,
	9. Name and Address of Cu	29 rrent Registered Agent	[30]	Florida Statutes Yes 10. Name and Address of New Ro		
			81 Name	The state of the s	- Broson was it	
RICE	& ROSE/ROSE, JAMES		82 Street Add	dress (P.O. Box Number is Not Acceptabl	01	
20 N. HALIFAX DRIVE			<u>L_l</u>	a dad (10. Don Marition is 1401 proception)		
DAYTO	ONA BEACH FL 32114		83			
			84 City		85	Zip Code
11. Pursuant to	o the provisions of Sections 607 C	0602 and 607 1608 Florida Stal	ulos the shows period some	pration submits this statement for the purp	FL °°	
SIGNATURE	Signature: Typed or product metal of edge levels.		(NOTE: Regulate LAger) signatur zwinz		DATE	
THLE	PD	DELETE	1 1 Tifte	ADDITIONS/CHANGES TO OFFI	CERS AND DIREC	rors in 12
NAME	LUKOS, FRANK	_	1.2 NAME			TORS IN 12
STREET ADDRESS	2926 OCEANS TRACE		1.3 STREET ADDRESS			
CITY-S1-ZIP	DAYTONA BEACH SHO	res fl	1.4 CPY - S1 - ZIP			
TITLE	VP	DELF1E	2 1 DUE		☐ Chang	e 🔲 Addition
NAME	LUKOS, RITA		2.2 NAME			
STREET ADDRESS	2926 OCEANS TRACE DAYTONA BEACH SHO	DEC EL	23 STREET ADDRESS			
CITY-ST ZIP TITLE	DATIONA BEAUTISTU	DELETE	2.4 CHY - ST ZIP 3. 1 TITLE		☐ Chang	. D Addiso
NAME		La verse	3.2 NAME		. :	e 🔲 Addition
STREET ADDRESS			3.3 STREET ADDRESS			
C(TY-ST-Z)F			3.4 CITY-SI, ZIP			
TITLE		☐ DELETE	4 1 TITLE		Cnang	e 🔲 Addition
NAME			4 2 NAME			
STREET ADDRESS			4.3 STHEET ADDRESS			
CITY-51-ZIP		Fig points	4.4 CITY - ST - ZIP			
TITLE NAME		DELETE	5 1 TITLE		Chang	e 🔲 Addition
STREET ADDRESS			5.2 NAME			
CITY - ST-ZIP			5 3 STREE! ADDRESS			
TITLE		☐ DELETÉ	5.4 CITY - S7 - 7/P 6.1 TITLE		Chang	e Addition
NAME			6 2 NAME		coang	- Li radinon
STREET ADDRESS			6 3 STREET ADDRESS			
CITY-S1-ZIP			6.4 C/TY - ST - Z/P			
14. Ldo hereby	certify that the information suppl-	ed with this filing is voluntarily fo	rnished and does not qualify:	for the exemption stated in Section 119.0	7(3)(k), Florida Sta	tutes. 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.

SIGNATURE: SIGNATURE AND TYPEO OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/16 44-253-3785 Chipter Proper