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

DOCUMENT # J60973

(1)

PIER SEAFOOD OF NORTH JACKSONVILLE, INC.

FILED Feb 17 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					, , , , , , , , , , , , , , , , , , , ,	,
1081 N. VOLUSIA AVE. 1081 N. VOLUSIA AVE.						
ORANGE CITY PL 32763		ORANGE CITY FL 32763	ORANGE CITY FL 32763		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					03/02/1987	
2. Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26	26		59-2795477	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Si Continuate of Status Doubled	Fee Required
City & State		— ·	City & State		6. Election Campaign Financing	\$5.00 May Be
23			Ztp Country		Trust Fund Contribution	
Zip	Country	Z _{ip}	 	ıry	 This corporation owes or has paid the Personal Properly Tax due June 30. 	e current fear Intangible Yes No
24	25 9. Name and Address of Curre	nt Registered Agent	30		10. Name and Address of New Registe	
CIA	MONS, ROLAND E.	in negation and	8	1 Name	10.	
	BI N. VOLUSIA AVE		-			
	ANGE CITY FL 32763		8	Street Ad	Idress (P.O. Box Number is Not Acceptable)	
Oit	AHOL OHI I C DEFOO		8	3		
			L			1
			Į.	4 City		FL 85 Zip Code
11. Pyrsuant I	to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	tes, the abo	ve-named co	orporation submits this statement for the purporation's board of directors. I hereby accept the	ose of changing its registered
agent. I a	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Floridal Such change was jalions of, Section 607.0505, Fl	autriorized Ig ⊘ tia Statut	by the corpor es.	ation's board or directors. Thereby accept the	appointment as registered
	Rolano E. Simme	ns Restel	~~~~		Presidet 2-1	11-11
	Signature, typed or printed name of registered aç			lgent signature req	go ed m en remand)	ATE
12.	PSD OFFICERS AN	ND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS	Change Addition
TITLE	SIMMONS, ROLAND E	_ bitti	1.1 TITLE 1.2 NAM			CT Originge CT Apparation
NAME	970 STARDUST WAY			ET ADDRESS		[8
STREET ADDRESS	DELAND FL		1.4 CITY			l g
CITY-ST-ZIP TITLE	DEC NOTE.	DELETE	2.1 1111.6			Change Addition
NAME		_	2.2 NAM	E		
STREET ADDRESS			2.3 STRE	ET ADDRESS		
CITY-ST-ZIP			2. 4 CITY	r - ST - ZIP		
TITLE		DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAM	E		
STREET ADDRESS			3.3 STRE	ET ADDRESS		
CITY-ST-ZIP			3.4. CITY	'-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME			4. 2 NAM	HE		
STREET ADDRESS			4.3 STRE	ET ADDRESS		
CITY-ST-ZIP		Druryt	4.4 CITY			Change Addition
TITLE		☐ DELETE	5.1 TITLE	- 1		Change Addition
NAME			5.2 NAM	1		
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP		☐ DELETE	5.4 CITY 6.1 TITLE			Change Addition
TITLE						C change C Addition
NAME PROCES ADDRESS			6.2 NAM	ET ADORESS		
STREET ADDRESS						
CITY-ST-ZIP	· <u></u> -		6.4 CITY	·al·zir		

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 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.