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**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K53410

(2)

BOSTON'S ON THE BEACH, INC.

## FILED May 08 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 40 S. OCEAN BLVD. 40 S. OCEAN BLVD. DELRAY BEACH FL 33483-3945 DELRAY BEACH FL 33483-3945 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/23/1988 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 65-0089016 Not Applicable 26 Suite, Apt. #, etc. Suito, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible X Yes 24 25 29 30 Personal Property Tax due June 30. ΠNo 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent **B1** Name BRIGHT, J. REEVE 29 NE 4TH AVE 82 Street Address (P.O. Box Number is Not Acceptable) **DELRAY BCH FL 33483** 83 84 City Zip Code 85 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. Thereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Stonature, typed or present name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1.1 TITLE TITLE NAME KENNEY, ROBERT 1.2 NAME 40 S. OCEAN BLVD. STREET ADDRESS 1.3 STREET ADDRESS **DELRAY BEACH FL** CITY-ST-ZIP 1.4 CITY-ST-7IP Change DELETE Addition 2.1 TITLE TITLE MASTERSON, FELIX 2.2 NAME NAME 40 S. OCEAN BLVD. STREET ADDRESS 2.3 STREET ADDRESS **DELRAY BEACH FL** 2. 4 CITY- ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition TITLE 3.1 TITLE **DONFRANCISCO, PETER** NAME 3.2 NAME 40 S. OCEAN BLVD. STREET ADDRESS 3.3 STREET ADDRESS **DELRAY BEACH FL** CITY-ST-ZIP 3.4. CITY - S1 - ZIP DELETE Addition 4,1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY- ST- ZIP CITY-ST-ZIP DELETE 6.1 TITLE Change Addition TITLE NAME 62 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP

14. Thereby 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.