


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

FILED  
Jul 28, 1999 8:00 am  
Secretary of State

07-28-1999 90017 044 \*\*\*558.75

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K70472

1. Corporation Name  
BECK'S BAR, INC.

Principal Place of Business  
323 SOUTH WASHINGTON BLVD.  
SARASOTA FL 34236

Mailing Address  
323 SOUTH WASHINGTON BLVD.  
SARASOTA FL 34236



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/06/1989	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 09-7509367	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
LANCER, M. JAY 323 S. WASHINGTON BLVD. SARASOTA FL 34236		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	FL 85 Zip Code

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE		(NOTE: Registered Agent signature required when reinstating)		DATE	
Signature, typed or printed name of registered agent and title if applicable.					
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	VP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LANCER, JAY	1.2 NAME			
STREET ADDRESS	210 LITTLE POND LN	1.3 STREET ADDRESS			
CITY-ST-ZIP	SARASOTA FL	1.4 CITY-ST-ZIP			
TITLE	ST	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LANCER, BARBARA	2.2 NAME			
STREET ADDRESS	210 LITTLE POND LN	2.3 STREET ADDRESS			
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP			
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			
CITY-ST-ZIP		3.4 CITY-ST-ZIP			
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		4.2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP		4.4 CITY-ST-ZIP			
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS			
CITY-ST-ZIP		5.4 CITY-ST-ZIP			
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			
CITY-ST-ZIP		6.4 CITY-ST-ZIP			

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 in an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

6/25/99 941 364 9335

Date

Daytime Phone #

CR3E034 (1/98)

0474695



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

July 9, 1999

BECK'S BAR, INC.  
323 SOUTH WASHINGTON BLVD.  
SARASOTA, FL 34236

SUBJECT: BECK'S BAR, INC.  
Ref. Number: K70472

1ST NOTICE 99 AR

Please be advised, we have received your annual report for the above corporation; however, the report has not been filed and a copy is being returned for the following:

We are unable to waive or reduce the late fee. The corporation received the corporate annual report and notice that failure to file the report by May 1 would result in a \$400.00 late fee.

The fee to file the annual report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

After the corrections have been made, please return the report to: Division of Corporations, Annual Report Section, P.O. Box 6327, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have any questions concerning the filing of your document, please call (850) 487-6059.

Stacy Prather  
Document Specialist

Letter Number: 099A00035694

please find ch #5994

Inclosed -

Thank.