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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L19703

(2)

PEP'S SEA GRILL, INC.

	Principal Place of Business	Mailing Address						
	622 182ND AVENUE 622 182ND AVENUE REDINGTON SHORES FL 33708 REDINGTON SHORES FL 33708-10			33				
						3. Date Incorporated or Qualified 10/02/1989		ate of Last Report 05/1996
	2. Principal Place of Business	2a. Mailing Address				4. FEI Number		Applied For
	21	26				59-298 1872		Not Applicable
	Suite, Apt. #, etc.	Suite, Apt #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required
	City & State	City & State				Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees
_	Zip Country  9. Name and Address of C	Zip	Cou	ntry		8. This corporation has banking fre	olekerieb <sup>a</sup>	AGENTATOR C 100 022
	CHIVAS, FRANK	direct registroise agent		81	Name			
622-182ND AVENUE			ļ	62	Street Addre			
	REDINGTON SHORES FL 33708			83				
	11. Pursuant to the provisions of Sections 60		Į	84			FL	

egistered pistered agent I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. S!GNATURE (NOTE Registered Agent signature required when rainstating) rine. Is seen or printed name of registered ages, and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) OFFICERS AND DIRECTORS 13. 12. Addition \_\_\_ Change DELETE 1.1 TITLE THE CHIVAS, FRANK 1.2 NAME NAME 1.3 STREET ADDRESS **622 182ND AVENUE** STREET ADJRESS REDINGTON SHORES FL 1.4 CITY - ST - ZIP CITY - S1 - 26 Addition Change DELETE 21 TITLE TITLE 2.2 NAME NAM: 23 STREET ADDRESS STREET ACORESS 2 4 CITY-ST-ZIP CITY S1-ZiP Addition Change DELETE 3 1 TITLE

101.6 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP C-TY - ST - ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CHY-ST ZIP Change Addition DELETE 6.1 TITLE Tillet 62 NAME 6.3 STREET ADDRESS STREET ADORESS 64 CITY-ST-ZIP CITY-SI-76

14. I do 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 of 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

**FILED** 

Mar 05 1997 8:00am

Secretary of State