

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

CORPORATION **5-1-95** **B.** FLORIDA DEPARTMENT OF STATE
ANNUAL REPORT **led**
1995
SECRETARY OF STATE
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

25 MAY -1 PM 2:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L48252** (5)
1. Corporation Name
THE PIT STOP LOUNGE, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business: 3601 14TH STREET INC.
BRADENTON FL 34205-2936
Mailing Address: 3601 14TH STREET INC.
BRADENTON FL 34205-2936

3. Date for Report or Qualified: **02/07/1990** 3a. Date of Last Report: **03/28/1994**
4. FET Number: **65-0238864** Applied For: ☐ Not Applicable: ☐
5. Certificate of Status Desired: ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: ☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 198.042, Florida Statutes: ☒ Yes ☐ No

2. Principal Place of Business: 26. Mailing Address:
21. State, Apt. # etc.: 27. State, Apt. # etc.:
22. City & State: 28. City & State:
23. 29.
24. 25. 29. 30.

9. Name and Address of Current Registered Agent

BORZA, AMERICO
527 S. WASHINGTON BLVD
SARASOTA FL 34236

10. Name and Address of New Registered Agent

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 197.004, and 607.104, 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 607.104, Florida Statutes.

SIGNATURE

Signature of the person filing this report (if not the corporation's registered agent)

Signature of the person filing this report (if not the corporation's registered agent)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME: **PTS**
2. NAME: **BORZA, AMERICO**
3. STREET ADDRESS: **527 S. WASHINGTON BLVD**
4. CITY, ST, ZIP: **SARASOTA FL 34236**
5. NAME:
6. STREET ADDRESS:
7. CITY, ST, ZIP:
8. NAME:
9. STREET ADDRESS:
10. CITY, ST, ZIP:
11. NAME:
12. STREET ADDRESS:
13. CITY, ST, ZIP:
14. NAME:
15. STREET ADDRESS:
16. CITY, ST, ZIP:

1. NAME: ☐ Change ☐ Addition
2. NAME: ☐ Change ☐ Addition
3. NAME: ☐ Change ☐ Addition
4. NAME: ☐ Change ☐ Addition
5. NAME: ☐ Change ☐ Addition
6. NAME: ☐ Change ☐ Addition
7. NAME: ☐ Change ☐ Addition
8. NAME: ☐ Change ☐ Addition
9. NAME: ☐ Change ☐ Addition
10. NAME: ☐ Change ☐ Addition
11. NAME: ☐ Change ☐ Addition
12. NAME: ☐ Change ☐ Addition
13. NAME: ☐ Change ☐ Addition
14. NAME: ☐ Change ☐ Addition
15. NAME: ☐ Change ☐ Addition
16. NAME: ☐ Change ☐ Addition
17. NAME: ☐ Change ☐ Addition
18. NAME: ☐ Change ☐ Addition
19. NAME: ☐ Change ☐ Addition
20. NAME: ☐ Change ☐ Addition
21. NAME: ☐ Change ☐ Addition
22. NAME: ☐ Change ☐ Addition
23. NAME: ☐ Change ☐ Addition
24. NAME: ☐ Change ☐ Addition
25. NAME: ☐ Change ☐ Addition
26. NAME: ☐ Change ☐ Addition
27. NAME: ☐ Change ☐ Addition
28. NAME: ☐ Change ☐ Addition
29. NAME: ☐ Change ☐ Addition
30. NAME: ☐ Change ☐ Addition
31. NAME: ☐ Change ☐ Addition
32. NAME: ☐ Change ☐ Addition
33. NAME: ☐ Change ☐ Addition
34. NAME: ☐ Change ☐ Addition
35. NAME: ☐ Change ☐ Addition
36. NAME: ☐ Change ☐ Addition
37. NAME: ☐ Change ☐ Addition
38. NAME: ☐ Change ☐ Addition
39. NAME: ☐ Change ☐ Addition
40. NAME: ☐ Change ☐ Addition
41. NAME: ☐ Change ☐ Addition
42. NAME: ☐ Change ☐ Addition
43. NAME: ☐ Change ☐ Addition
44. NAME: ☐ Change ☐ Addition
45. NAME: ☐ Change ☐ Addition
46. NAME: ☐ Change ☐ Addition
47. NAME: ☐ Change ☐ Addition
48. NAME: ☐ Change ☐ Addition
49. NAME: ☐ Change ☐ Addition
50. NAME: ☐ Change ☐ Addition
51. NAME: ☐ Change ☐ Addition
52. NAME: ☐ Change ☐ Addition
53. NAME: ☐ Change ☐ Addition
54. NAME: ☐ Change ☐ Addition
55. NAME: ☐ Change ☐ Addition
56. NAME: ☐ Change ☐ Addition
57. NAME: ☐ Change ☐ Addition
58. NAME: ☐ Change ☐ Addition
59. NAME: ☐ Change ☐ Addition
60. NAME: ☐ Change ☐ Addition
61. NAME: ☐ Change ☐ Addition
62. NAME: ☐ Change ☐ Addition
63. NAME: ☐ Change ☐ Addition
64. NAME: ☐ Change ☐ Addition
65. NAME: ☐ Change ☐ Addition
66. NAME: ☐ Change ☐ Addition
67. NAME: ☐ Change ☐ Addition
68. NAME: ☐ Change ☐ Addition
69. NAME: ☐ Change ☐ Addition
70. NAME: ☐ Change ☐ Addition
71. NAME: ☐ Change ☐ Addition
72. NAME: ☐ Change ☐ Addition
73. NAME: ☐ Change ☐ Addition
74. NAME: ☐ Change ☐ Addition
75. NAME: ☐ Change ☐ Addition
76. NAME: ☐ Change ☐ Addition
77. NAME: ☐ Change ☐ Addition
78. NAME: ☐ Change ☐ Addition
79. NAME: ☐ Change ☐ Addition
80. NAME: ☐ Change ☐ Addition
81. NAME: ☐ Change ☐ Addition
82. NAME: ☐ Change ☐ Addition
83. NAME: ☐ Change ☐ Addition
84. NAME: ☐ Change ☐ Addition
85. NAME: ☐ Change ☐ Addition
86. NAME: ☐ Change ☐ Addition
87. NAME: ☐ Change ☐ Addition
88. NAME: ☐ Change ☐ Addition
89. NAME: ☐ Change ☐ Addition
90. NAME: ☐ Change ☐ Addition
91. NAME: ☐ Change ☐ Addition
92. NAME: ☐ Change ☐ Addition
93. NAME: ☐ Change ☐ Addition
94. NAME: ☐ Change ☐ Addition
95. NAME: ☐ Change ☐ Addition
96. NAME: ☐ Change ☐ Addition
97. NAME: ☐ Change ☐ Addition
98. NAME: ☐ Change ☐ Addition
99. NAME: ☐ Change ☐ Addition
100. NAME: ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. Further, I 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 and make either valid that I am an officer or director of the corporation or the receiver or trustees empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attached statement.

SIGNATURE:

INITIALS AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-95 1-813-952-1661