

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90141 010 ***150.00

DOCUMENT # L84346

1. Corporation Name

BEVERLY HILLS BOWL, INC.

Principal Place of Business

**3330 N. LECANTO HWY.
BEVERLY HILLS FL 34464
US**

Mailing Address

**P.O. BOX 640428
BEVERLY HILLS FL 34464-0428
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/28/1990

4. FEI Number

59-3068240

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

**GILL, EVELYN K
3801 N. ROSEBAY PATH
BEVERLY HILLS FL 34464**

10. Name and Address of New Registered Agent

81 Name

PATRICIA FRANITZA

82 Street Address (P.O. Box Number is Not Acceptable)

83

3801 N ROSEBAY PATH

84 City

BEVERLY HILLS, FL

FL

85 Zip Code
34464

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-29-99

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME
GILL, EVELYN K
STREET ADDRESS
3801 N ROSEBAY PATH
CITY-ST-ZIP
BEVERLY HILLS FL

TITLE ☒ DELETE

NAME
GILL, EVELYN K
STREET ADDRESS
3801 N ROSEBAY PATH
CITY-ST-ZIP
BEVERLY HILLS FL

TITLE ☐ DELETE

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

PRES., SEC.

PATRICIA FRANITZA

P O BOX 640428 BEVERLY HILLS, FL 34464

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

-V-P, TRE.

JUDITH KUCHARSKI

P O BOX 640965 BEVERLY HILLS, FL 34464

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)