File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.								
		CLODED A DEDARTMENT OF CTATE						

LIMITED LIABILITY COMPANY ANNUAL REPORT



Sandra B. Mortham Secretary of State

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

	199	18 V	S. W.	DIVISION	OF CORE	PORATIONS		QR MAR -	a PM1	2: 18	
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee						98 MAR -9 PM 12: 18					
\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE 1. Name and Malling Address DOCUMENT # M96000000299						1/0 st					
1. Name and Mailing Address of Limited Liability Company DOCUMENT # M9600000299											
HARBOR DOCK'S SEAFOOD & BREWERY, L.L.C.					1a. Principal Place of Business Address						
		KHALL ROAD			·		101 FOX				
BIRMINGHAM AL 35213					BIRMING	HAM AL	35213	1			
-											
								A 102		-1 F	
•	al Place of Bus		_	ng Address	. ا ما ما		3. Date Organized or Qualified 3a. State of Formation			or Formation	
1310 Cobb Kane 1310 Co Suite, Apt. #, etc. Suite, Apt. #, etc.				bb Lo	ine	08/08/1996 AL			, , , , , , , , , , , , , , , , , , , 		
										Applied For	
City & State City & Sta			· •			63-1172	358		Not Applicable		
Birwi	ingham,	AL 35305	Zip	ningh	Count		5. Date of Last Re	eport	6. Certifica	ate of Status Desired	
35	205		35	205		,	04/08/1	997	\$8.75 Addit	ional Fee Required	
		and Address of Curren				B. 1	Name and Address	of New Regis	tered Agent	VOffice	
MORG	AN, CHA	ARLES				Name					
		DOCK'S				Street Address (P.O. Box Number is Not Acceptable)					
		98 EAST						,	·		
DEST.	IN FL 3	32541				Suite, Apt. #, etc.	Suite, Apt. #, etc.				
						0.1			Tin Code		
						City		FL	Zip Code		
9. Pursua	int to the provis	sions of Sections 608.416	and 608.508,	Florida Sta	tutes, the at	l bove-named limited	liability company su	bmits this state	ment for the	purpose of changing	
its register	red office or reg	istered agent, or both, in the accept the obligations.	e State of Flor	ida. Such ch	iange was a	uthorized by affirmat	tive vote of a majority	of the member	s. I hereby ac	ccept the appointment	
	•							ATE			
SIGNATU	HE	(Registered Agent Accepting	Appointment) (N	OTE: Registered	i Agent signatur	e required when reinstating	DATE				
10. Title	Ма	naging Members/Manage	ıs		Busine	ss Street Address		City, State and Zip Code			
									. .		
MGR	GR H.D. MANAGEMENT, L.L.C 101 FOXHALL ROZ					LL ROAD		BIRMIN	IGHAM	AL	
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11. Ido he	reby certify that	the information supplied w	rith this filing do	oes not quali	ify for the ex	emption stated in Se	ction 119.07(3) (i), FI	orida Statutes.	I further certi	ify that the information	

indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER