

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2004 8:00 am
Secretary of State

02-09-2004 90020 042 ***158.75

DOCUMENT # P01000016820

1. Entity Name
THE GEORGE & DRAGON PUB, INC.



Principal Place of Business
**1601 BLOUNT ROAD
POMPANO BEACH, FL 33069**

Mailing Address
**1601 BLOUNT ROAD
POMPANO BEACH, FL 33069**

2. Principal Place of Business
4140 N. FEDERAL HWY.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
FT. LAUDERDALE, FLA

City & State

Zip
33308

Country

Zip

Country

02032004

Chg-P

CR2E034 (10/03)

4. FEI Number
65-1077022

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HOWES, VIOLET
1601 BLOUNT ROAD
POMPANO BEACH, FL 33069**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **HOWES, STEPHEN**
STREET ADDRESS **1601 BLOUNT ROAD**
CITY-ST-ZIP **POMPANO BEACH, FL 33069**

TITLE **D** ☐ Delete
NAME **HOWES, VIOLET**
STREET ADDRESS **1601 BLOUNT ROAD**
CITY-ST-ZIP **POMPANO BEACH, FL 33069**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Violet Howes* **VIOLET HOWES**

2/4/04

954-975-3233