

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 02, 2008 8:00 am
Secretary of State

04-02-2008 90018 034 ***150.00

DOCUMENT # P01000089041

1. Entity Name

BAHAMAS SEAFOOD GRILL, INC.



Principal Place of Business

6280 VIA PALLADIUM
BOCA RATON FL 33433

Mailing Address

6280 VIA PALLADIUM
BOCA RATON FL 33433



2. Principal Place of Business - No P.O. Box #

1090 Woodbine Way
Suite, Apt. #, etc.
1011

3. Mailing Address

1090 Woodbine Way
Suite, Apt. #, etc.
1011

1st MOORE

CR2E034 (10/07)

City & State

Palm Beach Gardens, FL - Palm Beach Gardens, FL

4. FEI Number

65-1136141

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FERGUSON, ELDIN A JR
6280 VIA PALLADIUM
BOCA RATON FL 33433

7. Name and Address of New Registered Agent

Name Eldin A. Ferguson, Jr.

Street Address (P.O. Box Number is Not Acceptable)
1090 Woodbine Way # 1011

City Palm Beach Gardens

FL

Zip Code 33418

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, Title, and Name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when submitting)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VP	<input type="checkbox"/> Delete
NAME	FERGUSON, ELDIN A III	
STREET ADDRESS	130 SPARROW DRIVE	
CITY-ST-ZIP	WEST PALM BEACH FL 33411	
TITLE	T	<input type="checkbox"/> Delete
NAME	FERGUSON, ERIN A	
STREET ADDRESS	130 SPARROW DRIVE	
CITY-ST-ZIP	WEST PALM BEACH FL 33411	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ferguson Eldin Jr.	
STREET ADDRESS	1090 Woodbine Way # 1011	
CITY-ST-ZIP	Palm Beach Gardens, FL 33418	
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Sharon Ferguson	
STREET ADDRESS	1090 Woodbine Way # 1011	
CITY-ST-ZIP	Palm Beach Gardens, FL 33418	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Payable To: _____