

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000043419

1. Entity Name
CRAZY NICK'S CAFE, INC.



Principal Place of Business
1124 COLONNADES DRIVE
FT PIERCE, FL 34949

Mailing Address
1124 COLONNADES DRIVE
FT PIERCE, FL 34949

FILED
Jul 28, 2008 08:00 AM
Secretary of State



07222008 No Chg-P CR2E034 (11/05)

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4. FEI Number
03-0435831

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

ANGELOS, NICHOLAS G
1602 THUMBPOINT DRIVE
FT PIERCE, FL 34949

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IN THIS SPACE**

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
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PD
NAME ANGELOS, NICHOLAS G
STREET ADDRESS 1602 THUMBPOINT DRIVE
CITY-ST-ZIP FT PIERCE, FL 34949

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

U000000956410
07/28/08-80002-004 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: *Nick Angelos*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/25/08

Date

(774) 467-0204

Daytime Phone #