2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 16, 2005 8:00 am Secretary of State

DOCUMENT # P04000147692 1. Entity Name PYRAMID GRILL & STEAK, INC			03-16-2005 90043 037 ***150.00
Principal Place of Business 3080 NORTH FEBERAL HIGHWAY FT. LAUDERDALE, FL 33308	Mailing Address 3080 NORTH FEDERAL FT. LAUDERDALE, FL 3		
2. Principal Place of Business 1535 GULF TO BAY L	3. Mailing Address	1 <i>F</i>	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		03082005 Chg-P CR2E034 (10/03)
CLEARWATER, FL	City & State		4. FEI Number Applied For 20 - (804614 Not Applicable
CLEARWATER, FL Zip Country 337.56	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		Name	7. Name and Address of New Registered Agent
SAWCZUK, JERRY 2107 SE 10TH AVENUE			ERRY SAWCZUK s (P.O. Box Number is Not Acceptable)
818 FT. LAUDERDALE, FL 33316		153	5 GULF TO BAY OLVD
			LEARWATER FL 39956
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 agents SEARY SAUCZUK SIGNATURE SIGNATURE SIGNATURE 1 3 10 105			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renetating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$5	9. Election Campal Trust Fund Contr	Ign Financing \$ ribution.	55.00 May Be Idded to Fees
	AND DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME	☐ Delete		ERRY SAWCZUK Change X Addition 107 SE 10TH AVE #818
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	T. LAUDERDALE FL 33316
TITLE	Delete	TITLE V. P. 1	T. LAWDERDALE, FL 33316 02EF BOGACKI Change Addition
NAME STREET ADDRESS		STREET ADDRESS P	.o. Box 1077
CITY-ST-ZIP			LEARWATER, FL 33757-1077
NAME	Delete	TITLE NAME	☐ Change ☐ Addition
STREET ADDRESS CITY-SI-ZIP		STREET ADDRESS CITY-ST-ZIP	
TITLE	☐ Defete	TITLE	☐ Change ☐ Addition
NAME STREET ADDRESS		NAME STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE NAME	☐ Detete	TITLE NAME	Change Addition
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME STREET ADDRESS		NAME · STREET ADDRESS	
CITY-ST-ZIP	t with thin filing does not qualify for	CITY-ST-ZIP	Section 110 07/2V/i) Elevide Statutes I feether and its that the information
indicated on this report or supplemental rep	ort is true and accurate and that removered to execute this report	my signature shall have the	Section 119.07(3)(i), Florida Statutes. I further certify that the information he same legal effect as if made under oath; that I am an officer or director 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.			