

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 11, 2008 08:00 AM
Secretary of State

DOCUMENT # P04000161958

1. Entity Name

FRANKIE LOUNGE & LIQUOR STORE, INC.



Principal Place of Business

1236 SE 4TH AVENUE
FT. LAUDERALDE FL 33316

Mailing Address

721 NW 35TH TERRACE
FORT LAUDERDALE FL 33311



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/07)

4. FEI Number **47-0947107**

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LAW OFFICES OF PERRY E. THURSTON, JR., PA
1236 SE 4TH AVENUE
FT. LAUDERDALE FL 33316

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 transferring)

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 NAME STREET ADDRESS CITY-ST-ZIP	P MERRICKS, FRANCES 1236 SE 4TH AVENUE FT. LAUDERALDE FL 33316	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MERRICKS, JR., EARL 1236 SE 4TH AVENUE FT. LAUDERALDE FL 33316	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S THURSTON, FLOYD 1236 SE 4TH AVENUE FT. LAUDERALDE FL 33316	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO THURSTON, JR., PERRY 1236 SE 4TH AVENUE FT. LAUDERALDE FL 33316	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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02/20/08-80038-003 158.75

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:

James M. Menke
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/7/08
DATE

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