

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000000079 (3)

1. Corporation Name

MIZERAK'S POOL AND BILLIARDS, INC.



Principal Place of Business

Mailing Address

~~800 N FEDERAL HIGHWAY -~~
~~SUITE 440~~
~~BOCA RATON FL 33432~~

~~800 N FEDERAL HIGHWAY -~~
~~SUITE 440~~
~~BOCA RATON FL 33432~~

2. Principal Place of Business

21 4203 W. Hillsboro Blvd.

Suite, Apt. #, etc

22 City & State

23 Coconut Creek

24 Zip

33073

Country

25 Broward

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28

29 Zip

30

Country

3. Date Incorporated or Qualified

10/23/1992

3a. Date of Last Report

04/28/1995

4. FEI Number

65-0362862

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

KRAMER, WILLIAM S
~~800 N FEDERAL HIGHWAY~~
~~SUITE 440~~
~~BOCA RATON FL 33432~~

10. Name and Address of New Registered Agent

81 Name

THOMAS SKUBAL

82

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

4203 W. HILLSBORO BLVD.

83

84

COCONUT CREEK

FL

85

33073

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Thomas Skubal

Thomas Skubal

08/05/96

Signature, typed or printed name of registered agent and that of appointor

(NOTE: Registered Agent Signature required when re-electing)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

~~SEIDOMRIDGE, TANYA~~
~~5401 PALM RIDGE BLVD~~
~~DELRAY BEACH FL 33484~~

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

SKUBAL, LEONARD A
1300 THATCH PALM DR
BOCA RATON FL 33432

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

D, P

☒

Change

☐

Addition

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

D, S, T

☐

Change

☒

Addition

FRED SKUBAL

c/o 1300 THATCH PALM DR.

BOCA RATON, FL 33432

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

300001922593

-08/15/96--01003--009

***225.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Leonard A. Skubal* Leonard Skubal, President

08/05/96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Signature-Phone #

08/05/96

CR2E034 (3/96)