FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 PM 1:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P92000007325 (3)

1. Corporate Name
HOPS GRILL & BAR, INC.

Principal Place of Business:
3030 N ROCKY POINT DR W
STE 650
TAMPA FL 33607
US

Mailing Address:
3030 N ROCKY POINT DR W
SUITE 650
TAMPA FL 33607
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	11/23/1992
3a. Date of Last Report	05/01/1994
4. FEI Number	59-3156753
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes	[X] Yes ☐ No

2. Principal Place of Business / 2a. Mailing Address (blank)

9. Name and Address of Current Registered Agent
HIGBEE, R. ALAN
% FOWLER WHITE GILLEN BOGGS VILLAREAL
501 EAST KENNEDY BLVD., SUITE 1700
TAMPA FL 33602

10. Name and Address of New Registered Agent
Name:
Street Address (P.O. Box Number is Not Acceptable):
City: FL Zip Code:

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, or 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 accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	DPS
NAME	MASON, DAVID L
STREET ADDRESS	168 HARBORAGE CT
CITY-ST-ZIP	CLEARWATER FL
TITLE	DVT
NAME	SCHELLDORF, THOMAS A
STREET ADDRESS	170 GREENHAVEN CIRCLE
CITY-ST-ZIP	OLDSMAR FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1-1 TITLE	DPS	XX Change ☐ Addition
1-2 NAME	MASON, DAVID L.	
1-3 STREET ADDRESS	3055 TURTLE BROOK	
1-4 CITY-ST-ZIP	CLEARWATER, FL 34621	

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)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Thomas A. Schelldorf (signature)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-95 (813) 282-9350
Date / Daytime Phone #

0292964 CP