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PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # P9300000831 (6)

	BAR & GRILL COMPANY								
Principal Place 2908 GANDY E TAMPA FL 336 US	BLVD	2908 GANDY BLVD TAMPA FL 33611							
		•				3. Date incorporated or Qualified 01/02/1993	d 3a. Date of Last Report 04/11/1995		
Principal Pla The Principal Pla The Principal Pla	ce of Business	2a. Mailing Address 26	-			4. FE: Number 59-3157111			
Suite, Apt. #	, etc.	Suite, Apt. #, etc.	 			5. Certificate of Status Desired			Additional Required
City & State		City & State	<u> </u>			Election Campaign Financing Trust Fund Contribution			0 May Be d to Fees
Ζιρ 24	Country Zip Cou 25 29 30			ntry		This corporation has liability for Florida Statutes Yes Yes	intangible ta s \ No	k under s	199.032,
Name and Address of Current Registered Agent						10. Name and Address of New	Registered A	igent	
DECOULD ANY M				81	Name				
% STANFORD R. SOLOMON P.A. 101 E. KENNEDY BLVD., SUITE 1818 TAMPA FL 33629				82	Street Addre	ess (P.O. Box Number is Not Accepta	ble)		
				83					
				84	City		FL	85 Zip	p 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: Nod or printed name of registered agent and title. If applicable: [NOTE: Registered Agent suprature required when reinstaining] DATE									
	Signature, typed or printed name of registered agr		TE: Registered	Agen	it signature required	(when reinstating): ADDITIONS/CHANGES TO OF	DATE EICERS AND	DIBECTO	BS IN 12
12.				1.1 TITLE		ADDITIONS/GITANGES TO GIT		Change	Addition
NAME	RECCHIO, ANTHONY		1.2 N	1.2 NAME					
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NAME	,				ADDRESS				
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NAME			5.2 NAME				-	_ •	_
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TiTLE				6. 1 TITLE				Change	Addition
NAME			6.2 N	AME					
STREET ADDRESS			63S	TREET	ADDRESS				
CITY-SF-7IP					5T- ZIP				
14. I do hereb	y certify that the information supplie	d with this filing is voluntarily fur	nished and nual renort	doe:	s not qualify for	or the exemption stated in Section 119 te and that my signature shall have the	9.07(3)(k), Flo e same legat	rida Statut effect as if	tes. I further f made under

certity that the minormation inocated on this annual report or supplemental annual report is true and accorded 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:

Anthon Leaches Anthony Rechis

2-21-96 (811) 831-2174