

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 19, 2006 8:00 am
Secretary of State

07-19-2006 90004 021 ***150.00

DOCUMENT # P93000006019

1. Entity Name
ALFIE'S RESTAURANT, INC.



Principal Place of Business
**1666 OCEAN SHORE BLVD
ORMOND BEACH, FL 32176**

Mailing Address
**1666 OCEAN SHORE BLVD
ORMOND BEACH, FL 32176**

40055500



07132006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3163431

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**EVANS, GREGORY F
1666 OCEAN SHORE BLVD
ORMOND BEACH, FL 32176**

**DO NOT WRITE
IN THIS SPACE**

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 reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 6, 2006**

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
**D
EVANS, GREGORY
1666 OCEAN SHORE BLVD
ORMOND BCH, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-13-06

386-441-7024

Alfies

ATTACHMENT

40099980

RESTAURANT
& LOUNGE

#P93000006019

Dear Sirs

I recieved this bill ^(postcard) About 3 WEEKS Ago
Along with one for another corporation I own. I did not
recieve these bills in January and therefore did
not pay them or think about paying them. I have Always
paid them on time (13 years) and would have had
I received the first notice. I have sent the original
\$150.00 had I paid before April. I can be reached
at (386) 441-7024. IF I am going to be
required to pay the balance, I have a lot to
do besides remembering this fee each year, which is
what my Bookkeeper said. IF I didn't get a post card I
should have downloaded the form. GREG EVANS

1666 Ocean Shore Blvd. • Ormond Beach, FL 32176

386 (904) 441-7024 • Fax (904) 441-4840

email: Alfies1@aol.com

"We Love Company. Where Quality is Free"