FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

P93000009743 (4) DOCUMENT # 1. Corporation Name

S & G RESTAURANTS, INC.

Principal Place of Business Mailing Address									
34980 US HWY 19 34980 US 19 N PALM HARBOR FL 34684 PALM HARBOR FL 34684									
U\$ US						3. Date Incorporated or Qualified 3a. Date of Last Rep 02/01/1993 05/31/199			
2. Principal Pla	ace of Business	2a. Mailing Address	Mailing Address			4. FEI Number 59-3177388			Applied For Not Applicable
21		Suite, Apt. #, etc.	ite Ant # atc				\$8.7	5 Additional	
Suite, Apt. #	r, etc.	27	a ' ' ' '			5. Certificate of Status Desired			Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution	0 May Be d to Fees			
<i>Z</i> ip	Country	Zıp	Cour	itry		8. This corporation has liability for in		x under s	199.032,
24	25	29	30			Florida Statutes Yes 10. Name and Address of New R		Agent	
	9. Name and Address of Curre	ent Registered Agent		81	Name	10. Name and Address of New A	gistereu	Ayent .	
AOUOD	AFT FOR OADS O						->		
ACHCRAFT, EDELGARD G 300 31ST STREET N.				82 Street Address (P.O. Box Number is Not Acceptable)					
SUITE 2			<u> </u>	ВЗ					
	FERSBURG FL 33713		-	84	City			85 2	io Code
						ation submits this statement for the pur	FL	. `	•
SIGNATURE _		ND DIRECTORS	13.		d signature rodpired	d when reinstating! ADDITIONS/CHANGES TO OFFI			
12. Title	D			TLE		7.00(1)0100.01111000.01		Change	
NAME	SONDREGGER, DAVID J		1.2 NA	ME					
STREET ADDRESS	1450 MAHONGANY LANE				ADDRESS				
CITY-ST-ZIP	PALM HARBOR FL	T DELETE		1.4 CITY - ST - ZIP 2 1 TITLE				Change	Addition
THILE	D CI DELETE		1	22 NAME 23 STREET ADDRESS			1		
NAME STREET ADDRESS		400 S UNION ST							
CITY - ST-ZIP	DUNEDIN FL				ST-ZIP				
TITLE		☐ DELETE					١	∏ Chançe	Addition
NAME			3 2 NA		}				
STREET ADDRESS					T ADORESS				
CHTY-ST-ZIP TITLE				3.4 CHTY-ST-ZIP 4.1 TITLE				Change	Addition
NAME			42 N/						
STREET ADDRESS			4351	TREET	T ADDRESS				
CITY-S1-ZIP	<u> </u>				S1-ZIP			<u> </u>	The Address
TITLE		□ DELFTE	5. 1 T					☐ Change	e Addition
NAM5			52 N						
STREET ADDRESS					T ADDRESS ST-ZIP				
CITY-ST-ZIP		☐ DELETE	611	_				Chang	e 🔲 Addition
NAME		<u> </u>	6 2 N						
STREET ADDRESS			6.3 S	TREE	1 ADDRESS				
	1		•		1				

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

april 29, 1996