

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

DOCUMENT # P93000011282 (9)

1. Corporation Name

FLORINIGHTS, INC.



Principal Place of Business

9520 WINDSONG LANE
TAMPA FL 33618-4549

Mailing Address

9520 WINDSONG LANE
TAMPA FL 33618-4549
US

3. Date Incorporated or Qualified
02/11/1993

3a. Date of Last Report
06/02/1995

2. Principal Place of Business

2a. Mailing Address

21 Jimmy's PUB

26 Jimmy's PUB

4. FEI Number
59-3166494

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 12793 N. DALE Mabry Hwy

27 12793 N. DALE MABRY HWY

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

City & State

City & State

23 Tampa FLA

28 TAMPA FLA

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24 33618

25 Hillsborough

29 33618

30 Hillsborough

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GIBBONS, JOHN B
101 E. KENNEDY BLVD.
SUITE 1760
TAMPA FL 33602

81 Name

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

83

84 City

FL

85 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

Signature, typed or printed name of registered agent or director (delete)

(delete) Registered Agent signature required when making change

Date

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D
AHEARN, JAMES P SR.
STREET ADDRESS 9520 WINDSONG LANE
CITY - ST - ZIP TAMPA FL 33618-4549

TITLE ☐ DELETE

NAME D
AHEARN, JAMES P JR.
STREET ADDRESS 9520 WINDSONG LANE
CITY - ST - ZIP TAMPA FL 33618-4549

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

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

Change ☒ Addition

Same

Same

12316 WITHERIDGE

TAMPA FLA 33625

Change ☐ Addition

Change ☐ Addition

Change ☐ Addition

Change ☐ Addition

Change ☐ Addition

Change ☐ Addition

Change ☐ Addition

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James Ahearn

4/25/96

813-
26-Jimmy

Date

Daytime Phone #

CR2E034 (12/95)