

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**FILED**  
**Apr 29, 1999 8:00 am**  
**Secretary of State**

04-29-1999 90024 011 \*\*\*150.00  
 08-03-1999 90002 014 \*\*\*\*\*8.75

0086898

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
 Katherine Harris  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # P93000015936  
 1. Corporation Name  
 ANGEL'S LOUNGE, INC.

Principal Place of Business: 4502 S. DALE MABRY HWY. TAMPA FL 33611  
 Mailing Address: 4502 S. DALE MABRY HWY. TAMPA FL 33611



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
 21 4502 S. Dale Mabry  
 Suite, Apt. #, etc.  
 22  
 City & State  
 23 TAMPA, FL  
 Zip Country  
 24 33611 25 USA

2a. Mailing Address  
 26 1547 S. Dale Mabry  
 Suite, Apt. #, etc.  
 27  
 City & State  
 28 TAMPA, FL 33629  
 Zip Country  
 29 33629 30 USA

3. Date Incorporated or Qualified  
 03/02/1993

4. FEI Number  
 59-3176718  Applied For  
 Not Applicable

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 owes the current year Intangible Personal Property.  Yes  No

9. Name and Address of Current Registered Agent  
 KUCIK, JOHN  
 4502 S DALE MABRY HWY  
 TAMPA FL 33611

10. Name and Address of New Registered Agent  
 81 Name MARIA DUGARTE  
 82 Street Address (P.O. Box Number is Not Acceptable) 1547 S. DALE MABRY HWY  
 83  
 84 City TAMPA FL 85 Zip Code 33629

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] DATE: 7-5-99

12. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	KUCIK, JOHN	
STREET ADDRESS	4502 S DALE MABRY HWY	
CITY-ST-ZIP	TAMPA FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	MARIA DUGARTE	
1.3 STREET ADDRESS	4502 S. Dale Mabry Hwy	
1.4 CITY-ST-ZIP	TAMPA, FL 33629	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing 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: [Signature] DATE: 7/5/99 (813) 251-5235

CR2E034 (5/99)