


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 06 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000020802 (3)

1. Corporation Name  
BONO'S PIT BAR-B-Q, INC.

Principal Place of Business 7411 FULLERTON ST., STE 105 JACKSONVILLE FL 32256	Mailing Address 7411 FULLERTON ST., STE 105 JACKSONVILLE FL 32256
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2002 SAN MARCO BLVD Suite, Apt. #, etc. 22 #204 STE. City & State 23 JACKSONVILLE, FL Zip 24 32207		2a. Mailing Address 25 P.O. BOX 47876 Suite, Apt. #, etc. 27 City & State 28 JACKSONVILLE, FL Zip 29 32247		3. Date incorporated or Qualified 03/18/1993	
				4. FEI Number 59-3191740	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent BEMENT, RONALD D 7411 FULLERTON, ST STE 105 JACKSONVILLE FL 32256				10. Name and Address of New Registered Agent 81 Name PAUL SAFFELL 82 Street Address (P.O. Box Number is Not Acceptable) 2002 SAN MARCO BLVD 83 STE. 204 84 City JACKSONVILLE FL 85 Zip Code 32207	

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 and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PC	NAME	MORENCY, DAVID	1.1 TITLE		1.2 NAME	
STREET ADDRESS	7411 FULLERTON ST, STE 105			1.3 STREET ADDRESS		1.4 CITY-ST-ZIP	
CITY-ST-ZIP	JACKSONVILLE FL			2.1 TITLE		2.2 NAME	
TITLE	V	NAME	RHODEN, FRED K	2.3 STREET ADDRESS		2.4 CITY-ST-ZIP	
STREET ADDRESS	7411 FULLERTON ST, STE 105			3.1 TITLE		3.2 NAME	
CITY-ST-ZIP	JACKSONVILLE FL			3.3 STREET ADDRESS		3.4 CITY-ST-ZIP	
TITLE	V	NAME	DILLON, CHUCK	4.1 TITLE	PRESIDENT	4.2 NAME	T. WAYNE DAVIS
STREET ADDRESS	7411 FULLERTON ST, STE 105			4.3 STREET ADDRESS	2002 SAN MARCO BLVD. STE #204	4.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207
CITY-ST-ZIP	JACKSONVILLE FL			5.1 TITLE	SECRETARY	5.2 NAME	PAUL K. SAFFELL
TITLE	PRESIDENT	NAME	T. WAYNE DAVIS	5.3 STREET ADDRESS	2002 SAN MARCO BLVD. STE #204	5.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207
STREET ADDRESS	2002 SAN MARCO BLVD, STE #204			6.1 TITLE		6.2 NAME	
CITY-ST-ZIP	JACKSONVILLE, FL 32207			6.3 STREET ADDRESS		6.4 CITY-ST-ZIP	
TITLE	SECRETARY	NAME	PAUL SAFFELL				
STREET ADDRESS	3002 SAN MARCO BLVD, STE #204						
CITY-ST-ZIP	JACKSONVILLE, FL 32207						
TITLE		NAME					
STREET ADDRESS							
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 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 a 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:

CR2E034 (10/97)