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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000022410

1. Corporation Name

PHILLY BOY'S, INC.

Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90049 004 ***150.00



						II BIRBA IIDII Fa ik Iadi		
Principal Place of Business Mailing Address								
7570 COMMERCE CT 7570 COMMERCE CT.						•		
SARASOTA FL	34243	SARASOTA FL 34243 US	SARASOTA FL 34243		ļ	DO NOT WRITE IN THIS SPACE		
US US			•			3. Date Incorporated or Qualifed		
						03/22/1993	İ	
2 Principal Pl	ace of Business	2a. Mailing Address	2a Mailing Address			4. FEI Number	Applied For	
	ace of Business	— <u> </u>	26			65-0406300	Not Applicable	
Suite, Apt. :	# etc		Suite, Apt. #, etc.			\$8	.75 Additional	
22		27	<u>مية المورس ها رسان بي المحي والمحاملية المحيدة في المحيدة في المراوعة المراوعة المراوعة المراوعة المراوعة الم</u>			ee Required		
City & State			City & State			6. Election Campaign Financing \$5	5.00 May Be	
23		28	- 7 '				dded to Fees	
Zip			Count			8. This corporation owes the current year Intangible	,	
24	25	<u> </u>	30			Personal Property Tax.		
	9. Name and Address of Curre					10. Name and Address of New Registered Agent		
	O. Manie Startage of Contract		8	1 Na	me			
Greenberg, Steven R						(DO D. H. Lais N. A.		
2033	MAIN ST		82 Str		eet Addres	Address (P.O. Box Number is Not Acceptable)		
SUIT	E 402		8	3				
	ASOTA FL 34237							
			8	4 Cit	į	FL 85	Zip Code	
44. December 19 to the provisions of Captions S07 0502 and S07 1509. Statutes the above named corneration 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.		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECT			
IIITE	DP	☐ DELETE	1.1 TITLE				nange	
NAME	BERGER, DAVID W		1.2 NAM	Ē	ł			
STREET ADDRESS	1310 HILLVIEW DR	J R 1.3 \$		ET ADDR	ESS		1	
CITY-ST-ZiP	SARASOTA FL 34239		1.4 CiTY-S					
TITLE	DTS	☐ DELETE	2.1 TITLE			□ CI	hange	
NAME			2.2 NAMI	Ε				
STREET ADDRESS			2.3 STRE	ET ADOR	ESS			
CiT1-51-ZiP****	-HORSHAM PA-			ST-ZIP				
TITLE			3.1 TITLE				hange	
NAME	_		3.2 NAMI	Ē			1	
STREET ADDRESS				ET ADDR	ESS		}	
CITY-ST-ZIP	177		3.4. CITY					
TITLE		☐ DELETE	4.1 TITLE				nange	
NAME				NAME			1	
l			4.3 STRE		FSS		ļ	
STREET ADDRESS		-	4.4 CITY-1		.	•	ļ	
CITY-ST-ZIP			5.1 TITLE		+		nange	
TITLE		C 022272	5.1 (IILE 5.2 NAME			Load		
NAME					ESS		į	
STREET ADDRESS	9			STREET ADDRESS CITY-ST-ZIP			Ì	
CITY-ST-ZIP		☐ DELETE	6.1 TITLE				hange Addition	
TITLE		C1 DELETE				_ Cr	iango Lucidon	
NAME			6.2 NAME			•		
STREET ADDRESS		İ		ET ADDR	ESS	•	Ĭ	
CITY-ST-ZIP	,		6.4 CITY	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, with all other like empowered.

SIGNATURE:



941-351-1600