

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 24 1998 8:00am  
Secretary of State

DOCUMENT # P93000025223 (7)

1. Corporation Name

FT. MYERS RESTAURANT SUPPLY, INC.



Principal Place of Business

Mailing Address

2336 FOWLER ST  
FT. MYERS FL 33901

2336 FOWLER ST  
FT. MYERS FL 33901

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 1962 Honda Dr.

Suite, Apt. #, etc.

2a. Mailing Address

26 1962 Honda Dr.

Suite, Apt. #, etc.

City & State

23 Ft. Myers FL

City & State

28 Ft. Myers FL

Zip

24 33907

Country

25 LEE

Zip

29 33907

Country

30 LEE

3. Date Incorporated or Qualified

04/01/1993

4. FEI Number

65-0406218

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 or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BARRY, DANIEL J  
2336 FOWLER ST.  
FT. MYERS FL 33901

10. Name and Address of New Registered Agent

81 Name BARRY, DANIEL J.  
82 Street Address (P.O. Box Number is Not Acceptable)  
1962 Honda Dr.  
83  
84 City Ft. Myers FL 85 Zip Code 33907

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

TITLE 0  
NAME BARRY, DANIEL J  
STREET ADDRESS 237 S.E. 20TH PL  
CITY-ST-ZIP CAPE CORAL FL 33990

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME BARRY, DANIEL J.  
1.3 STREET ADDRESS 16691 SAN EDMUNDO Rd.  
1.4 CITY-ST-ZIP Punta Gorda FL 33955

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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 in an attachment with an address.

SIGNATURE

4/5/98 (941) 332-3304

CR2E034 (10/97)