

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

95 APR 28 PM 2:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P93000032047 (1)

1. Corporation Name

EL PASS O CAFE, INC.

Principal Place of Business

Mailing Address

~~125 - 129TH AVE.~~  
MADEIRA BEACH FL 33708

~~125 - 129TH AVE.~~  
MADEIRA BEACH FL 33708

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/03/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

59-3180789

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 has liability for intangible tax under S. 190.002,  
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 13331 GULF BLVD.

26 13331 GULF BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 MADEIRA BCH., FL.

28 MADEIRA BCH., FL.

Zip

Country

Zip

Country

24 33708

25 USA

29 33708

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BROIDA & NAPIER P.A.  
605 - 75TH AVE.  
ST. PETERSBURG FL 33708

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 and fee if applicable)

(If 31L Registered Agent signature required show name/initials)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME STONE, DAVID L  
STREET ADDRESS 125 - 129TH AVE.  
CITY, ST, ZIP MADEIRA BEACH FL 33708

1.1 TITLE SAME ☒ Change ☐ Addition  
1.2 NAME SAME  
1.3 STREET ADDRESS 13331 GULF BLVD.  
1.4 CITY, ST, ZIP SAME

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY, ST, ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY, ST, ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY, ST, ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY, ST, ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: DAVID L. STONE

(Signature and typed or printed name of signing officer or director)

4/25/95

813-392-8986