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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

SIGNATURE:

1	996	3 37	DIVISION OF	CORFORATIO	NS	1			
, Corporation N	Name		40465 (5	5)					
HUBB'S PUB - CAROLWOOD, INC.						I ARAHARA AKA ARHIR KININ RAHA AR	 		L a r aldo del aldo
rincipal Place c	of Business	Mail	ling Address						
	H COGSWELL STREET		1535 NORTH COGSV STE. A-3	WELL STREET					
STE. A-3 ROCKLEDGE	E FL 32955		ROCKLEDGE FL 329	65		3. Date Incorporated or Qualified	3a Da	te of Last Re	
NOONEED SE VE SESS						06/03/1993	05/01/1995		
Pencipal Pla	ce of Business	2a.	Mailing Address			4. FLI Number			pplied For
,		26				59-3183948			lot Applicable
Suite, Apt. #	, etc.	l h	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required
Cat. 8 State		27	City & State			6. Election Campaign Financing) May Be
City & State		28	Ony of chem.			Trust Fund Contribution			to Fees
Zip	Country	· · · · · · · ·	Zφ	Country	•	8. This corporation has liability for		tax under s	199.032.
	25	29		30		Florida Statutes L Yes 10. Name and Address of New F	No No	d Agent	
	9. Name and Address of Curre	nt Regist	tered Agent	81	Name	10. Name and Address of New	tegratore.	a Agent	,
	D D414D					TO CO. D. Markey Blot Reserved			
	r, david North Cogswell Street			82	Street Add	ress (P.O. Box Number is Not Acceptal	леј		
				63	• · -				
NIF 0				84	Gity			. 85 Zıç	o Code
STE. A ROCKI	LEDGE FL 32955						F		
ROCKL 1. Pursuant to or registers	LEDGE FL 32955 to the provisions of Sections 607 050 ed agent, or both, in the State of Flor th, and accept the obligations of, Sco	nda Such	rchange was authoriz	tes, the above in zed by the corp.	1	ration submits this statement for the pord of directors. Thereby accept the app	minse of c	hanring its r	egistered offic agent. I am
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NED NAME OF SIGNING OFFICER OF DIRECTOR

4-23-96 Bastin Profes