## 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 # **P93000046666**

PARK AVE BBQ & GRILLE OF TEQUESTA, INC.

Principal Place	of Business	Mailing A	ddress					3 311)	B1616 61116 61118	***********
236 US HWY 1		4135 BUR	NS RD						•	
TEQUESTA FL 33458 PALM BEACH GARDENS FL				. 33410			DO NOT WRITE IN THIS SPACE			
		US					3. Date Incorporated or Qualife		SPACE	
							07/01/1993	u		
- 5	(0)	D. Mailin	a Address	•			4. FEI Number		I Ani	olied For
<del>-</del> '	ace of Business	2a. Mailin	g Address				65-0442812			Applicable
21	H 242	26 Suite	Apt. #, etc.				03/0442012	_	\$8.75 A	
Suite, Apt. #	F, etc.	27	Apt. #, etc.				5. Certifcate of Status Desired		Fee Re	
City & State			k State				6. Election Campaign Financing		\$5.00	
·	•	28					Trust Fund Contribution	' D	Added to	-
Zip	Country	Zip		Cour	ntry		8. This corporation owes the cu	rrent year Int	angible	
24	25	29		30	•		Personal Property Tax.			□No
24)	9. Name and Address of Currer		Agent	1			10. Name and Address of New	Registered	Agent	
					81	Name				
WOR	ICESTER, HENRY E III				-	C4 A 4 4	rese (D.O. Bey Number is Not Asses	table)		
130 E	EDWARDS LN				82	Street Add	ress (P.O. Box Number is Not Accep	каше)		
PALN	A BEACH SHORES FL 33404			ľ	83			·		
								-	7:- 6	
					84	City		FL	85 Zip C	ode
office or re agent. I an	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida, Suc	:h chance was a	uthorized	by tr	he corporati	poration submits this statement for the on's board of directors. I hereby acc	ept the appoi	intment as reg	gistered
SIGNATURE							- Lucian de la companya de la compan	DATE		
	Signature, typed or printed name of registered age				Agent s	signature require	ad when reinstating)	DATE	ID DIRECTO	RS IN 12
12.	OFFICERS AN	nt and title if applicab	S	13.	•	signature require	ad when reinstating) ADDITIONS/CHANGES TO O		ND DIRECTO	RS IN 12
12.	OFFICERS AN			13.	LE	signature require				
12. TITLE NAME	PD WORCESTER, HENRY E III		S	13. 1.1 TITI 1.2 NA	LE ME					
12. TITLE NAME STREET ADDRESS	PD WORCESTER, HENRY E III 130 EDWARDS LN	ND DIRECTORS	S	13. 1.1 TIT 1.2 NA 1.3 STI	LE ME REET A	ADDRESS				
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AN PD WORCESTER, HENRY E III 130 EDWARDS LN PALM BEACH SHORES FL 334	ND DIRECTORS	S DELETE	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT	LE ME REET A Y-ST-2	ADDRESS	ADDITIONS/CHANGES TO O			
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AN PD WORCESTER, HENRY E III 130 EDWARDS LN PALM BEACH SHORES FL 334 VD	ND DIRECTORS	S	13. 1.1 TIT 1.2 NAI 1.3 STI 1.4 CIT 2.1 TIT	LE ME REET A Y-ST-I	ADDRESS	ADDITIONS/CHANGES TO O		☐ Change	☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AN PD WORCESTER, HENRY E III 130 EDWARDS LN PALM BEACH SHORES FL 334 VD LAVALLEE, DEAN E	ND DIRECTORS	S DELETE	13. 1.1 TIT 1.2 NAI 1.3 STI 1.4 CIT 2.1 TIT 2.2 NAI	LE ME REET A Y-ST-1 LE ME	ADDRESS ZIP	ADDITIONS/CHANGES TO O		☐ Change	☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AN PD WORCESTER, HENRY E III 130 EDWARDS LN PALM BEACH SHORES FL 334 VD LAVALLEE, DEAN E 329 KELSEY PARK CIR	ND DIRECTORS	S DELETE	13. 1.1 TIT 1.2 NAI 1.3 STI 1.4 CIT 2.1 TIT 2.2 NAI 2.3 STI	LE ME REET A Y-ST-: LE ME REET A	address Zip Address	ADDITIONS/CHANGES TO O		☐ Change	☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AN PD WORCESTER, HENRY E III 130 EDWARDS LN PALM BEACH SHORES FL 334 VD LAVALLEE, DEAN E	ND DIRECTORS	S DELETE  DELETE	13. 1.1 TITI 1.2 NAI 1.3 STI 1.4 CIT 2.1 TIT 2.2 NAI 2.3 STI 2.4 CI	LE ME Y-ST-I LE ME REET A	address Zip Address	ADDITIONS/CHANGES TO O		☐ Change	☐ Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE	OFFICERS AN PD WORCESTER, HENRY E III 130 EDWARDS LN PALM BEACH SHORES FL 334 VD LAVALLEE, DEAN E 329 KELSEY PARK CIR	ND DIRECTORS	S DELETE	13. 1.4 TIT 1.2 NA 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CIT 3.1 TIT	LE ME Y-ST-LE ME REET A TY-ST-	address Zip Address	ADDITIONS/CHANGES TO O		☐ Change	Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	OFFICERS AN PD WORCESTER, HENRY E III 130 EDWARDS LN PALM BEACH SHORES FL 334 VD LAVALLEE, DEAN E 329 KELSEY PARK CIR	ND DIRECTORS	S DELETE  DELETE	13. 1.1 TIT 1.2 NA 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CIT 3.1 TIT 3.2 NA	LE ME Y-ST-: LE ME REET A TY-ST- LE	ADDRESS ZIP  ADDRESS -ZIP	ADDITIONS/CHANGES TO O		☐ Change	Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AN PD WORCESTER, HENRY E III 130 EDWARDS LN PALM BEACH SHORES FL 334 VD LAVALLEE, DEAN E 329 KELSEY PARK CIR	ND DIRECTORS	S DELETE  DELETE	13. 1.4 TIT 1.2 NA 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CIT 3.1 TIT 3.2 NA 3.3 STI	LE ME Y-ST- LE ME TY-ST- LE ME REET A TY-ST- LE ME	ADDRESS ADDRESS -ZIP ADDRESS	ADDITIONS/CHANGES TO O		☐ Change	Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AN PD WORCESTER, HENRY E III 130 EDWARDS LN PALM BEACH SHORES FL 334 VD LAVALLEE, DEAN E 329 KELSEY PARK CIR	ND DIRECTORS	S DELETE  DELETE	13. 1.4 TIT 12 NA 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2.4 CC 3.1 TIT 3.2 NA 3.3 STI 3.4 CC 3.4 CC	LE ME Y-ST- LE ME Y-ST- LE ME ME REET A ME REET A ME	ADDRESS ADDRESS -ZIP ADDRESS	ADDITIONS/CHANGES TO O		☐ Change	Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME	OFFICERS AN PD WORCESTER, HENRY E III 130 EDWARDS LN PALM BEACH SHORES FL 334 VD LAVALLEE, DEAN E 329 KELSEY PARK CIR	ND DIRECTORS	S DELETE  DELETE	13. 1.3 TIT 1.2 NA 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2. 4 CI 3.1 TIT 3.2 NA 3.3 STI 3.4 CI 4.1 TIT	LE ME Y-ST-1 LE ME TY-ST-1 LE ME TY-ST-1 LE ME ME LE ME LE ME LE ME LE LE LE LE LE LE LE	ADDRESS ZIP ADDRESS -ZIP ADDRESS	ADDITIONS/CHANGES TO O		☐ Change	Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AN PD WORCESTER, HENRY E III 130 EDWARDS LN PALM BEACH SHORES FL 334 VD LAVALLEE, DEAN E 329 KELSEY PARK CIR	ND DIRECTORS	S DELETE  DELETE	13. 1.3 TIT 1.2 NAI 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2. 4 CI 3.1 TIT 3.2 NA 3.3 STI 3.4 CI 4.1 TIT 4. 2 NA	LE ME REET A LE LE ME	ADDRESS ZIP  ADDRESS -ZIP  ADDRESS -ZIP	ADDITIONS/CHANGES TO O		☐ Change	Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AN PD WORCESTER, HENRY E III 130 EDWARDS LN PALM BEACH SHORES FL 334 VD LAVALLEE, DEAN E 329 KELSEY PARK CIR	ND DIRECTORS	S DELETE  DELETE	13. 1.3 TIT 1.2 NAI 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2. 4 CIT 3.1 TIT 3.2 NA 3.3 STI 3.4 CIT 4.1 TIT 4.2 NA 4.3 STI	LE ME REET A Y-ST-; LE ME ME ME REET A MF ME REET A ME REET A ME REET A	ADDRESS ZIP  ADDRESS -ZIP  ADDRESS -ZIP	ADDITIONS/CHANGES TO O		☐ Change	Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AN PD WORCESTER, HENRY E III 130 EDWARDS LN PALM BEACH SHORES FL 334 VD LAVALLEE, DEAN E 329 KELSEY PARK CIR	ND DIRECTORS	S DELETE  DELETE	13. 1.3 TIT 1.2 NAI 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2. 4 CIT 3.1 TIT 3.2 NA 3.3 STI 3.4 CIT 4.1 TIT 4.2 NA 4.3 STI	LE ME REET A Y-ST-; LE ME ME ME REET A ME ME ME ME REET A ME ME REET A ME ME REET A MY-ST-	ADDRESS ZIP  ADDRESS -ZIP  ADDRESS -ZIP	ADDITIONS/CHANGES TO O		☐ Change	Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AN PD WORCESTER, HENRY E III 130 EDWARDS LN PALM BEACH SHORES FL 334 VD LAVALLEE, DEAN E 329 KELSEY PARK CIR	ND DIRECTORS	S DELETE  DELETE  DELETE	13. 1.3 TIT 1.2 NAI 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2. 4 CIT 3.2 NA 3.3 STI 3.4 CIT 4.1 TIT 4.2 NA 4.3 STI 4.4 CIT 4.4 CIT	LE ME Y-ST-: LE ME MY-ST- LE ME	ADDRESS ZIP  ADDRESS -ZIP  ADDRESS -ZIP	ADDITIONS/CHANGES TO O		☐ Change ☐ Change ☐ Change	Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	OFFICERS AN PD WORCESTER, HENRY E III 130 EDWARDS LN PALM BEACH SHORES FL 334 VD LAVALLEE, DEAN E 329 KELSEY PARK CIR	ND DIRECTORS	S DELETE  DELETE  DELETE	13. 1.3 TIT 1.2 NAI 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2. 4 CIT 3.2 NA 3.3 STI 3.4 CIT 4.1 TIT 4.2 NA 4.3 STI 4.4 CIT 5.1 TIT 5.2 NAI	LE ME Y-ST-J LE ME	ADDRESS ZIP  ADDRESS -ZIP  ADDRESS -ZIP	ADDITIONS/CHANGES TO O		☐ Change ☐ Change ☐ Change	Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AN PD WORCESTER, HENRY E III 130 EDWARDS LN PALM BEACH SHORES FL 334 VD LAVALLEE, DEAN E 329 KELSEY PARK CIR	ND DIRECTORS	S DELETE  DELETE  DELETE	13. 1.3 TIT 1.2 NAI 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2. 4 CIT 3.2 NA 3.3 STI 3.4 CIT 4.1 TIT 4.2 NA 4.3 STI 4.4 CIT 5.1 TIT 5.2 NAI	LE  ME  REET A  ME  ME  ME  ME  ME  ME  ME  ME  ME  M	ADDRESS ZIP  ADDRESS -ZIP  ADDRESS ZIP  ADDRESS ZIP	ADDITIONS/CHANGES TO O		☐ Change ☐ Change ☐ Change	Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AN PD WORCESTER, HENRY E III 130 EDWARDS LN PALM BEACH SHORES FL 334 VD LAVALLEE, DEAN E 329 KELSEY PARK CIR	ND DIRECTORS	S DELETE  DELETE  DELETE	13. 1.3 TIT 1.2 NAI 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2. 4 CIT 3.2 NA 3.3 STI 3.4 CIT 4.2 NA 4.3 STI 4.4 CIT 5.1 TIT 5.2 NAI 5.3 STI 5.3 STI	LE  ME  REET A  ME  ME  ME  ME  ME  ME  ME  ME  ME  M	ADDRESS ZIP  ADDRESS -ZIP  ADDRESS ZIP  ADDRESS ZIP	ADDITIONS/CHANGES TO O		☐ Change ☐ Change ☐ Change	Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AN PD WORCESTER, HENRY E III 130 EDWARDS LN PALM BEACH SHORES FL 334 VD LAVALLEE, DEAN E 329 KELSEY PARK CIR	ND DIRECTORS	S DELETE  DELETE  DELETE	13. 1.3 TIT 1.2 NAI 1.3 STI 1.4 CIT 2.1 TIT 2.2 NA 2.3 STI 2. 4 CIT 3.2 NA 3.3 STI 3.4 CIT 4.1 TIT 4.2 NA 4.3 STI 4.4 CIT 5.1 TIT 5.2 NAI 5.3 STI 5.4 CIT 5.4 CIT	LE  ME  REET A  ME  ME  ME  ME  ME  ME  ME  ME  ME  M	ADDRESS ZIP  ADDRESS -ZIP  ADDRESS ZIP  ADDRESS ZIP	ADDITIONS/CHANGES TO O		☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition

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 of an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: \_

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF

FILED Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90074 024 \*\*\*150.00