

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000062342 (9)

1. Corporation Name

BERMUDA BAR & GRILL, INC.

FILED
Apr 23, 1996 08:00 AM
Secretary of State



Principal Place of Business

3509 NE 163RD ST.
NORTH MIAMI FL 33160

Mailing Address

3525 NE 163RD ST.
NORTH MIAMI BEACH FL 33160

2. Principal Place of Business

2a. Mailing Address

21

26

3801 Hollywood Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

Suite 101

City & State

City & State

23

28

Hollywood FL

Zip

Country

Zip

Country

24

25

29

33021

30

USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

09/07/1993

3a. Date of Last Report

04/28/1995

4. FET Number

65-0434147

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

MILLER, SHANNON L
3525 NE 163RD ST.
NORTH MIAMI BEACH FL 33160

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 the corporation

NOTE: Registered Agent's signature required when registering

DATE

12. OFFICERS AND DIRECTORS

TITLE C ☐ DELETE

NAME LAGESCHULTE, DAVE
STREET ADDRESS 3525 NE 163RD ST.
CITY-ST-ZIP NORTH MIAMI BEACH FL

TITLE P ☐ DELETE

NAME VASU, MARK
STREET ADDRESS 3525 NE 163RD ST.
CITY-ST-ZIP NORTH MIAMI BEACH FL

TITLE SDM ☐ DELETE

NAME MILLER, SHANNON
STREET ADDRESS 3525 NE 163RD ST.
CITY-ST-ZIP NORTH MIAMI BEACH FL

TITLE M ☐ DELETE

NAME DELANEY, JOE
STREET ADDRESS 3525 NE 163RD ST.
CITY-ST-ZIP NORTH MIAMI BEACH FL

TITLE D ☐ DELETE

NAME BRAWNER, TERRY
STREET ADDRESS 3525 NE 163RD ST.
CITY-ST-ZIP NORTH MIAMI BEACH FL

TITLE D ☐ DELETE

NAME REGINER, DALE
STREET ADDRESS 3525 NE 163RD ST.
CITY-ST-ZIP NORTH MIAMI BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/96

954-964-9993

CR2E034 (12/95)