

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

**APPROVED AND FILED**

**95 MAY -1 PM 1:10**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Hanske B. Murdoch  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P93000069648 (2)**

**1. Corporation Name  
B.S.V. RESTAURANTS, INC.**

**Principal Place of Business Mailing Address**  
% GEORGE L. HAYES III P.A.  
696 1ST AVE. NORTH, SUITE 303  
ST. PETERSBURG FL 33701

DO NOT WRITE IN THIS SPACE

**3. Date Incorporated or Created 10/07/1993**  
**3a. Date of Last Report 10/04/1994**

**2. Principal Place of Business 2a. Mailing Address**

**4. FEI Number 59-3204679**  
 Applied For  
 Not Applicable

**22. State Apt # etc 27. State Apt # etc**

**5. Certificate of Status Desired**  **\$8.75 Additional Fee Required**

**23. City & State 28. City & State**

**6. Election Campaign Financing Trust Fund Contribution**  **\$5.00 May Be Added to Fees**

**24. City 25. Country 29. City 30. Country**

**8. This corporation has liability for exchange fee under S. 199.032, Florida Statutes**  Yes  No

**9. Name and Address of Current Registered Agent**

**10. Name and Address of New Registered Agent**

**GEORGE L. HAYES III, SERVICES INC.  
696 1ST AVENUE NORTH  
SUITE 303  
ST. PETERSBURG FL 33701**

**91 Name**  
**92 Street Address (P.O. Box Number is Not Acceptable)**  
**93**  
**94 City** **FL** **95 Zip Code**

**11. Pursuant to the provisions of Sections 607.04(2) and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to the 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 607.05(3), Florida Statutes.**

**SIGNATURE** \_\_\_\_\_ **Title (Registered Agent, Director, Officer, or Secretary)** \_\_\_\_\_

**12. OFFICERS AND DIRECTORS**

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

**1 NAME**  
**2 NAME**  
**3 STREET ADDRESS**  
**4 CITY, STATE, ZIP**

Change  Addition

**5 NAME**  
**6 NAME**  
**7 STREET ADDRESS**  
**8 CITY, STATE, ZIP**

Change  Addition

**9 NAME**  
**10 NAME**  
**11 STREET ADDRESS**  
**12 CITY, STATE, ZIP**

Change  Addition

**13 NAME**  
**14 NAME**  
**15 STREET ADDRESS**  
**16 CITY, STATE, ZIP**

Change  Addition

**17 NAME**  
**18 NAME**  
**19 STREET ADDRESS**  
**20 CITY, STATE, ZIP**

Change  Addition

**21 NAME**  
**22 NAME**  
**23 STREET ADDRESS**  
**24 CITY, STATE, ZIP**

Change  Addition

**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 199.01(2)(B), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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, director or registered agent of the corporation or the receiver or trustee appointed to succeed this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report. I am an attorney at law.**

**SIGNATURE:** *Salvatore Ventimiglia*  
PRINT NAME OF OFFICER, DIRECTOR

**4-28-95, (813) 822-6883**