PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P9400008136

PEP'S SEA GRILL OF SEMINOLE, INC.

Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90051 023 ***150.00



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Principal Place of Business Mailing Address)		
8595 SEMINOLE BLVD SEMINOLE FL 33772		622-182 AVENUE REDINGTON SHORES FL 33708			DO NOT WRITE IN THIS SPA	ACE	
US					3. Date Incorporated or Qualifed 01/21/1994		
2. Principal P	lace of Business	2a. Mailing Address	a. Mailing Address		4. FEI Number	A	pplied For
21 2		26	26		00 020000		ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State		- City & State			6. Election Campaign Financing Trust Fund Contribution St.00 May Be Added to Fees		
Zip	Country	Zip	Countr	y	8. This corporation owes the current year Intangi	ible	
24	25	29 30	0			Yes	□No
	9. Name and Address of Currer				10. Name and Address of New Registered Age	nt	
				Name			
CHIVAS, FRANK R 622 182ND AVE			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
STE. 201 REDINGTON SHORES FL 33708			. 83				
			84		FL	,	Code
office or r agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligation.	of Florida. Such change was autr	nonzea by	/ tne corporati	poration submits this statement for the purpose of cha ion's board of directors. I hereby accept the appointment	nging its ent as r	s registered egistered
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: Re	egistered Age	ent signature require	ed when reinstating) DATE		
12.	0.1.102.107.112.01.112		13.		ADDITIONS/CHANGES TO OFFICERS AND D		
TITLE	P	DELETE 1.1 TI			L] Change	Addition
NAME	CHIVAS, FRANK R		1.2 NAME	ŀ			
STREET ADDRESS			1.3 STREI	ET ADDRESS			
CITY-ST-ZIP	REDINGTON SHORES FL		1.4 CITY-	ST-ZIP		1 Change	☐ Addition
TITLE	☐ DELETE 2.11		2.1 TITLE	j	Ц] Change	
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREE	ET ADDRESS			
CITY-ST-ZIP			2.4 CITY-	ST-ZIP		Change	☐ Addition
TITLE	DELETE: 3.11] Change	
NAME			3.2 NAME				
STREET ADDRESS			3.3 STRE	ET ADDRESS			
CITY-ST-ZIP			3.4. CITY-	ST-ZIP		Change	Addition
TITLE		☐ DELETE	4.1 TITLE			7 Angalye	
NAME			4, 2 NAME				
STREET ADORESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP	, ,		4.4 CITY-	ST-ZIP		7 Chance	T" Addition
TITLE		☐ DELETE	5.1 TITLE		L] Change	e [] Addition
NAME			5.2 NAME				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	5.4 CITY-			7.05	- Address
TITLE	 	☐ DELETE	6.1 TITLE	i	L] Change	Addition
NAME			6.2 NAME				
STREET ADDRESS	1		6.3 STRE	ET ADDRESS			
	 The Relation of the Street Control 		0.4.000	a			

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 on an attrichment with an address, with all other like empowered.

SIGNATURE: