(11/98)	
CR2E034	

·r			Amended: #61.25
PROFIT CORPORATION ANNUAL REPORT 1999	Katherin Secretary		Back of the second of the seco
DOCUMENT # P 9400001	7398 (6)		99 MAY 24 ATT 11:21
1. Corporation Hattle			SE DIRECTORIO STATE TALLAHAS DE LA FLORIDA
SON'S CAFE,	INC.		
Principal Place of Business	Mailing Address	- , ,	
2705-54th Ave.N.	2705-54th		
St.Petersburg, FL 33714	St.Petersb	urg, FL 33	the common of th
(3. Date incorporated or Qualifed
2. Principal Place of Business	2a. Mailing Address		03-01-94 4. FEI Number
21	26		4. FEI Number Applied For Not Applied For Not Applied For
Suite, Apt. #, etc.	Suite, Apt. #, etc		S8 75 Additional
22	27		5. Certificate of Status Desired [] Fee Required
City & State	City & State		6. Election Campaign Financing \$5.00 May Be
Zip Country	28 Zip	Country	Trust Fund Contribution Added to Fees
[24] [25]		50	8. This corporation owes the current year Intangible Personal Property Tax.
9. Name and Address of Curren			10. Name and Address of New Registered Age it
NGUYENJOHN 2705-54th Ave N. St.Petersburg, FL 33714		81 Name 82 Street Ar 83	TRAN, PHAN diess [PO Box Number is Not Acceptable] 2705-54th Ave.N. St. Petersburg, FL 8t Zit, Code 33714
11. Pursuant to the provisions of Sections 607,050 office or registered agent, or both, in the State agent. I am familiar with, and accept the obligat	of Florida. Such change was aut	horized by the corpora	proration submits this statement for the purpose of chan jing its registered afton's board of directors. Thereby accept the appointment as registered
Lawrence Hould Adva			04-27-99
Fignature, typed of price of registered agen	D DIRECTORS	A¶steriod Agenit signature req ■ 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	[DELETE		
NAME.		1.2 NAME	TRAN, PHAN
STREET ADDRESS		13 STREET ADORESS	2705-54th Ave.N.
aty-st-zip		1.4 CITY-ST-ZIP	St.Petersburg, FL 33714
TITLE	[]] DELETE	21 TITLE	[] Crange [] Addition
NAME .		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	Ennonnover e
TI'LE	Ell delene	2 4 CITY-ST-ZIP 3 1 TITLE	5000028948250 -06/04/9901028**015 ^{Addiso}
NAME	L – L	3.2 NAME	*****61.25 ******61.25
STREET ADDRESS		3.3 STREET ADDRESS	
CiTY-SI-ZiP		34 QITY-51-ZIP	
7/ILE	[] DELETE	4 1 TITLE	[] Chinge [] Addition
NAME		4 2 NAME	
STREET ADDRESS		43 STREET ADORESS	
TITLE		44 CHY-ST-ZFF 5 1 T-TLE	LIGHTA: [Addition]
NAME	i i pricir	51 VILE 52 NAME	1,400,00

53 STREET ADDRESS

63 STREET ADORESS

5.4 CHY-\$T-ZII-

6 TITLE

6.2 NAME

CITY-ST ZIP

14. Pereby 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 a final report is true and accurate and that my signature shull have the same legal effect as if made under oals, 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. Funda Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with equadriess, with all other like empowered.

SIGNATURE:

TRAN_THII

0.4-27-99 (727) 527-91 20 TRAN, THU

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE:

S*REET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREE ADDRESS

04-27-99

Date:

(727) 527-81 38 District Proc. #