FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000018212 (8)

LEVEROCK'S RESTAURANT CORPORATION

FILED Apr 16 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						- * 10011004 460 10111 01017 80111 90111 00111 00101 10104 17110 11001 17010 1701	
54 COREY AVE 54 COREY AVE 54 COREY AVE ST PETERSBURG BEACH FL			EACH FL 33706	. 33706			
						DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	-
						03/03/1994	_
2. Principal Place of Business		2a. Mailing Address	F-1 "			4. FEI Number Applied For	\dashv
Suite, Apt. #, etc.			[26]			59-3228803 Not Applicat	Ole
	#, BIC.	· · · · ·	Suite, Apt. #, etc.			5. Certificate of Status Desired See Required	
22 City & Stat	Α		City & State				\dashv
23		├ ─ ┐ '	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	İ
Zip	Country		Zip Cour			8. This corporation owes or has paid the current year Intangible	\neg
24	25	 	29 30			Personal Property Tax due June 30. Yes No	
g. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent	
FN	GLANDER, LEONARD S			81	Name		
5959 CENTRAL AVE				62	Ctroot Addres	ss (P.O. Box Number is Not Acceptable)	
STE 201				02	Street Addres	ss (P.O. Box Number is Not Acceptable)	
ST PETERSBURG FL 33710				83			\neg
	12/2/1000110				0':		_
				84	City	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida \$	Statutes, the ab	oove	-named corpo	ration submits this statement for the nursose of changing its registers	ed l
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.							
		garant of contain contact			,		
SIGNATURE Signature, typod or printed name of registered agent and little if applicable. (NOTE Registered Agent signature required when reinstaling						when reinstaling) DATE	-
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TALE	CEO	☐ DELET	E 1.1 TH	TLE		Change Additi	ion
NAME	JOHN E STROSS		1.2 NA	ME			
STREET ADDRESS	54 COREY AVE		1.3 \$1	REET A	address		-
CITY-ST-ZIP	\$T.PETE BCH FL		1.4 01	TY-ST	- ZIP		
TITLE	STD DELETE 2.1 TO		LE		Change Additi	100	
NAME	RI CHARD A. TADPAN		2.2 NA	ME			
STREET ADDRESS	54 CORY AVE		2.3 ST	REET A	ADDRESS		
CITY+ST+ZIP	\$T.PETE BCH FL		2. 4 Cl	TY - SI	T - ZiP		_
TITLE		☐ DELET	E 3.1 TH	LE		Change Additi	IOU
NAME			3.2 NA	ME			
STREET ADDRESS			3.3 ST	REET A	ADDRESS		
CITY-\$T-ZIP			3.4. CI		T-ZIP		
TITLE		☐ DELET	E 4.1 11T	LE		Change Additi	ion
NAME			4. 2 N/	AME			
STREET ADDRESS			4.3 ST	REET A	ADDRESS		
CITY-ST-ZIP			4.4 CIT	IY-ST	- ZIP		
TITLE		☐ DELET	E 5.1 TIT	[LE		Change Additi	IDN
NAME			5.2 NA	ME			
STREET ADDRESS			5.3 ST	REET A	ADDRESS		
CITY-ST-ZIP		<u> </u>	5.4 CIT	IY-ST	- ZIP		
TITLE		☐ DELET	E 6.1 TIT	TLE		Change Additi	ion
NAME			6.2 NA	ME			
STREET ADDRESS			6.3 \$1	REET #	ADDRESS		
CITY-ST-ZIP	<u> </u>		6.4 CIT				
	and the contract of the contra					nation 110 07/2/6). Florida Ctatutas, I further partifu that the information	

indicated on this annual report or supplied with this ming does not quality in the exemption stated in Section 1.19.07(3)(1), Florida Statutes. I further certify that the information indicated on this annual report is 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.