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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DE PARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

P94000019478 (4)

CHRISTOPHER'S DANCE CLUB, INC.

Principal Place of Business Mailing Address  5917 \$ CONGRESS AVE 5917 \$ CONGRESS AVE						
5917 S CONGRESS AVE 603N ATLANTIS FL 33462 US		603N	603N			
		atlantis FL 33462 US	ATLANTIS FL 33462 US			3. Date Incorporated or Qualified
2. Principal Place of Business 21		2a. Mailing Address 26	1			4. FEI Number Applied For 65-0474262 Not Applied be
Suite. Apt. #	f, etc	Suite, Apt #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required
City & State		Orty & State			w	6. Election Campaign Financing 1 rust Fund Contribution   \$5.00 May Be Added to Fees
Ζιρ <b>24</b>	Country 25	7 (r)	30			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes
	9. Name and Address of Currer	nt Registered Agent		04   4		10. Name and Address of New Registered Agent
				81	Name	
	R, CHRISTOPHER			82 5	Street Addres	ess (P.O. Box Number is Not Acceptable)
5917 S CONGRESS AVE 603N ATLANTIS FL 33462				83		
				-		85 Zip Gode
*				84	Oity	FL 85 Zip Code
or registeri	o the provisions of Sections 607.0500 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec	ida. Such change was authoriz	ed by the o	ove nan corpora	ned corpora ation's board	ation submits this statement for the purpose of changing its registered offici a of directors. Thereby accept the appointment as registered agent. I am
SIGNATURE _						
12.	Signative, typed or probabilitia neletrogeth re Lajir:  OF LICE DO AN	taviste tau stade (f): ID DIRECTORS	13.	IA⊕irtsi,	gradium negara 19	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1 1 3	ITLE		Change Addition
NAME	HEMMER, CHRISTOPHER	<b>-</b>		1.2 NAME		<del></del>
STREET ADDIRESS	5917 S CONGRESS AVE		135	TREET AD	IDRESS	
CHTY - ST - Z-P	ATLANTIS FL		14C	EY+ST+Z	ZIP	
TITLE		☐ DELETE	2 1 1	ITLE		Change Addition
NAME			22 N	AMÉ		
STREET ADOPESS			238	TREET AD	DRESS	
CITY - ST - Z P			24C	17Y - \$1 - 2	ŽiP	
TITLE		☐ DELÉTE	3 1 ⊺	TILE		☐ Change ☐ Addition
NAME			3 2 N			
STREET ADDRESS			33 8	TREET A	DORESS	
CiTY - ST - Z-P		— Driete		ITY - ST - 3	ZIF	Chagge Maddlege
TITLE		DELETE	4. 1 1			Change Addition
NAME			42 N			
STREET ADDRESS				TREET AD		
CITY-ST-ZIP		DELETE		!!Y-\$!-	ZIP	Change Addit-on
TITLE		L1 perrie	5 1 1 5 2 M			Sourcer
NAME express absonce			52 N	ame Treet ad	ADDE GG	
STREET ADDRESS						
CITY - ST - ZIP TITLE		DELETE	6 1 1	ITY-ST-, MUE	211	☐ Change ☐ Add-tion
NAME			6.2 N			
STREET ADORESS				IREFT AC	ingess	
SINCLI ADUNESS	1		033	ing i I AL	CONTRACT.	

14. I do hereby certify that the information supplied with this filing is vocuntarily 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 tris 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 receivor 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:

MATTHE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRPLETOR

5/1/16

642 8575

CR2E034 (12/95)