

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

FILED
Mar 25 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000024388 (8)

1. Corporation Name

VISTA BOWLING MANAGEMENT CORP.

Principal Place of Business

2101 VISTA PARKWAY
WEST PALM BEACH FL 33411
US

Mailing Address

2101 VISTA PKWY
WEST PALM BCH FL 33411
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/25/1994

4. FEI Number

65-0486418

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21
Suite, Apt. #, etc.

22
City & State

23
Zip Country

2a. Mailing Address

26
Suite, Apt. #, etc.

27
City & State

28
Zip Country

9. Name and Address of Current Registered Agent

PITTS, MARLENE
270 SAND RUN RD
WEST PALM BCH FL 33413

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered
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.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

Marlene Pitts, Pres

4-1-98

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME GUGGINO, JOE
STREET ADDRESS 9990 S.W. 77TH AVENUE, SUITE 313
CITY-ST-ZIP MIAMI FL 33156

TITLE D ☐ DELETE

NAME MULLEN, RICHARD
STREET ADDRESS 9990 S.W. 77TH AVENUE, SUITE 313
CITY-ST-ZIP MIAMI FL 33156

TITLE D ☐ DELETE

NAME PITTS, MARLENE
STREET ADDRESS 9990 S.W. 77TH AVENUE, SUITE 313
CITY-ST-ZIP MIAMI FL 33156

TITLE D ☐ DELETE

NAME YAMAMURA, HERBERT
STREET ADDRESS 9990 S.W. 77TH AVENUE, SUITE 313
CITY-ST-ZIP MIAMI FL 33156

TITLE D ☐ DELETE

NAME MUNTZ, CHARLES P
STREET ADDRESS 23799 SW 167TH AVE
CITY-ST-ZIP HOMESTEAD FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 attachment with an address.

SIGNATURE:

Marlene Pitts

Marlene Pitts

4-1-98 561-683-5200

CR2E034 (10/97)