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

PROFIT CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sendra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000027092 (3)

ROCK - & - JOCK CAFE, INC.

Principal Place of Business		Mailing Address		<del></del> ,		
420 E PINE AVE		420 E PINE AVE				
CRESTVIEW FL 32536 - 32539		CRESTVIEW FL 32536- 32539				
						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified 04/06/1994
2. Principal Place of Business		2a. Mailing Address				4. FEI Number Applied For
ri e		26				<b>59-3394555</b> Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.				5. Certificate of Status Desired Security Securi
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip 24 24	·	Zip 29	Country 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
9. Name and Address of Current Registered Agent				61		10. Name and Address of New Registered Agent
420 E PINE AVE CRESTVIEW FL 92590 32539				82 Street Address (P.O. Box Number is Not Acceptable) 83		
				84	City	FL 85 Zip Code
11. Pursuant to the provision office or registered agen agent. I am familiar with	is of Sections 607.050 it, or both, in the Slate and accept the obliga	2 and 607.1508, Florida of Florida. Such change ations of, Section 607.05	Statutes, the was authoriz 05, Florida St	above ed by atutes	e-named c the corpo	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
SIGNATURE						
Signature, typod or printed name of registered agent and title if application (NOTE: Registered Agent signature required  12. OF FICE RS AND DIRECTORS  13.					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME HARRIS, GEORGE DANNA "DOODLE"  STREET ADDRESS 420 E. PINE AVE.						Change Li Addition
			1	1.2 NAME		
			1.3	1.3 STREET ADDRESS		
0011-31-20	231 - 611			1.4 CITY - ST - ZIP		
TITLE		☐ DELET	2.1	TITLE	ļ	Change Addition
NAME			2.7	NAME	)	
STREET ADORESS			2.3	STREET	ADDRESS	
CITY-ST-ZIP			2.4	CITY-S	T-ZIP	

CITY-ST-ZIP 6.4 CITY - S1 - 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 of supplicmental 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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 14 contains a supplication of the receiver or trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 14 contains a supplication of the receiver or trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 15 contains a supplication of the receiver or trustee employers.

3.1 TITLE

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADORESS

5.4 CITY-ST-ZIP

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3.4. CITY-ST-ZIP

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May 21 1998 8:00am

Secretary of State