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PROFIT CORPORATION ANNUAL REPORT



SIGNATURE: X SIGNATURE AND TYPE) OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DOCUMENT # P9400044164 (9) HAMPTON'S RESTAURANT, INC.						
Principal Place	e of Business	Mailing Address			III. EBN BEN BIN BIN E	
1118 MAS DAYTONA	SON AVE BEACH FL 32117	1118 MASON A DAYTONA BEAC				
2. Principal Pl	lace of Business	20 14.7.		3. Date Incorporated or Qualified 06/14/1994	3a. Date of Las 03/00	st Report 3/1995
	add of Edginess	2a. Mailing Address		4. FEI Number 59-3257447	-	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc	ò.	5. Certificate of Status Desired		Not Applicable 75 Additional
City & State	9	City & State		Election Campaign Financing Trust Fund Contribution	□ \$5	.00 May Be
Zip	Country 25	Zip 29	Country 30	8. This corporation has liability for in Florida Statutes R Yes	intangible tax unde	rs 199.032,
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New R		
			81 Name			
MOORE, BARRY L 1118 MASON AVE			82 Street Ad	82 Street Address (P.O. Box Number is Not Acceptable)		
DAYT(ONA BEACH FL 32117		83			
			84 City		—. 85	Zip Code
						Zip Code
. Pursuant to or registere	o the provisions of Sections 607.950 ed agent, or both, in the State of Flor	2 and 607.1508, Florida Sta	atutes, the above-named corpo	pration submits this statement for the purp	pose of changing it	s registered office
Tamiliar witi GNATURE	h, and accept the obligations of, Sec	ction 607.0505, Florida Statu	utes.	oration submits this statement for the purp ard of directors. I hereby accept the appo	pose of changing it pintment as register	is registered office red agent. I am
GNATURE	n, and accept the obligations of, Sec Signature, typed or printed name of registered agen OFFICERS AN	ction 607.0505, Florida Statu	atutes, the above-named corpcionized by the corporation's boutes. [NOTE Registered Agent signature requirements]	ed when reinstaining)	pose of changing it pintment as register	ed agent. I am
GNATURE:	n, and accept the obligations of, Sec Signature, typed or printed name of registered agen OFFICERS AN	tion 607.0505, Florida Statu	utes. (NOTE: Registered Agent signature requir	это от апросота. Тиегеру ассерт те аррс	pose of changing it pintment as register	TORS IN 12
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