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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

**DIVISION OF CORPORATIONS** 

DOCUMENT # P94000051726 (5)

MURPHYS STEAKHOUSE & PUB, INC.

**FILED** May 12 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								<del>"</del>	T DESCRIPE AND DEUT COME ENVIOUENT DEUT DEUT DEUT DEUT AUDIT HOUSE HEUR DURF HEUR
805 E. CANAL ST. P.O. BOX 1108 MULBERRY FL 33860-055 US						5			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  07/08/1994
2, Principal P	Place of Busin	ness	21	, Mailing A	ddress				4. FEI Number Applied For
21				26					59-325 1930 Not Applicable
					Apt. #, etc.				Certificate of Status Desired     \$8.75 Additional
22				27					Fee Required
					y & State				6, Election Campaign Financing \$5.00 May Be
Zip Country			28	Zip Coul			intry		Trust Fund Contribution Added to Fees
24	<u> </u>				30				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24 25 29 3 9, Name and Address of Current Registered Agent						11			10. Name and Address of New Registered Agent
MURPHY, MICHAEL G							81	Name	
	XX HWY 37						62	Street Addre	ress (P.O. Box Number is Not Acceptable)
MU	LBERRY FI	L 33860						<del></del>	
							63		
							84	City	FI 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or both, in the State of Florida Such change was auth agent. I am familiar with, and accept the obligations of, Section 607.0505, Florid						es, the a authorize orida Sta	bove d by tutes	e-named corporations.	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered
SIGNATURE			-						
	Signature, typed	or printed name of registers			(NOT		d Age	ni signature require	red when reinstating) DATE
12.	<u> </u>	OFFICERS	AND DIRE		DELETE	13.	T. F	<del></del>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	D	V MICHAEL O		L	DELETE	1,1 T(			Change Addition
NAME MURPHY, MICHAEL G STREET ADDRESS P.O. BOX 1108 N/A				1.2 N				ADDRESS	
CITY-ST-ZIP MULBERRY FL.							TY-SI		
TITLE	D			DELETE 211				I* ZIF	☐ Change ☐ Addition
NAME	JAMES G. MURPHY			22 M			AME		<del>-</del> •
STREET ADDRESS	CRESCE	ENT LAKE DRIVE				235	REET	ADORESS	
CRY-ST-ZIP LAKELAND FL					2 4 CITY-ST-			3T-ZIP	
TITLE	D DELETE					3.1 71	3.1 TITLE		Change Addition
NAME	MURPHY, MICHAEL					•	3.2 NAME		
STREET ADDRESS							3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	D D	OKY FL			DELETE	3.4. C 4.1 31		T-ZIP	☐ Change ☐ Addition
NAME	_	Y, VICTORIA		L	DELETE	4.2 N			Cualife
STREET ADDRESS		X 138 NA						ADDRESS	
CITY-ST-ZIP	MULBER						TY - 51	ľ	
TITLE	D				DELETE	5.1 TI			☐ Change ☐ Addition
NAME	MURPHY	r, Sean G				5.2 N	ME		
STREET ADDRESS		X 138 NA				5.3 \$1	REET	ADDRESS	
CITY-ST-ZIP	MULBER	RY FL				5.4 CI	TY - \$1	T-ZIP	
TITLE					DELETE	6.1 TI	TLE		☐ Change ☐ Addition
NAME						62 N			
STREET ADDRESS						63 S1	REET	ADDRESS	

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 suppliermental 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: Mikel & Murch

MICHAR G MURPHY

30 APR 98