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Mar 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000064720 (3)

1. Corporation Name
SYDNEY'S RESTAURANT & CATERING, INC.

Principal Place of Business

SPANISH PLAZA UNIT #10
638 E 3RD AVENUE
NEW SMYRNA BEACH FL 32169

Mailing Address

SPANISH PLAZA UNIT #10
638 E 3RD AVENUE
NEW SMYRNA BEACH FL 32169-3164



2. Principal Place of Business

21 2976 S. Ridgewood Ave
Suite, Apt. #, etc.

2a. Mailing Address

26 119 Rio Grande
Suite, Apt. #, etc.

City & State

23 Edgewater 91

City & State

28 Edgewater FL

Zip

24 32141

Country

25 Volusia

Zip

29 32141

Country

30 Volusia

9. Name and Address of Current Registered Agent

DAVIS, BILLIE S
387 CASTLEWOOD LN
NEW SMYRNA BEACH FL 32168

3. Date Incorporated or Qualified

08/29/1994

3a. Date of Last Report

03/15/1996

4. FEI Number

59-3262363

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

DAVIS - Billie S.

82

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

119 Rio Grande

83

84

City

Edgewater

FL

85

Zip Code

32141

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME DAVIS, BILLIE S
STREET ADDRESS 2555 SUNSET DRIVE
CITY - ST - ZIP NEW SMYRNA BEACH FL 32168

TITLE D ☐ DELETE

NAME DAVIS, ROBERT S
STREET ADDRESS 2555 SUNSET DRIVE
CITY - ST - ZIP NEW SMYRNA BEACH FL 32169

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY - ST - ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY - ST - ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY - ST - ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY - ST - ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 119 Rio Grande

1.4 CITY - ST - ZIP Edgewater FL 32141

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS 119 Rio Grande

2.4 CITY - ST - ZIP Edgewater - FL 32141

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 do 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:

Billie Ann Davis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-1-97

904-426-0180

Date Daytime Phone #

CR2E034 (9/96)