FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAR 23 PM 4:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000066911 (6)

1. Corporation Name
LENNY & VINNY'S OF TAMPA PALMS, INC.

Principal Place of Business
6950 CENTRAL AVE SUITE 160
ST PETERSBURG FL 33707

Mailing Address
6950 CENTRAL AVE SUITE 160
ST PETERSBURG FL 33707

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 16063 TAMPA PALMS BLVD. W.
Suite, Apt. #, etc
22
City & State
23 TAMPA FL
Zip 24 33647 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: 09/09/1994
3a. Date of Last Report:
4. FEI Number: 59-3246046 — 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

9. Name and Address of Current Registered Agent
STEINBACH, ALAN
6950 CENTRAL AVE SUITE 160
ST PETERSBURG FL 33707

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 (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PST
NAME	STEINBACH, ALAN
STREET ADDRESS	6950 CENTRAL AVE SUITE 160
CITY-ST-ZIP	ST PETERSBURG FL 33707

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	P/D	☐ Change ☒ Addition
12 NAME	PAUL L. SAMSON	
13 STREET ADDRESS	2 ADALIA AVENUE, UINT 405	
14 CITY ST ZIP	TAMPA FL 33606	
21 TITLE	VP	☒ Change ☐ Addition
22 NAME	ALAN P. STEINBACH	
23 STREET ADDRESS	6950 CENTRAL AVENUE, SUITE 160	
24 CITY ST ZIP	ST. PETERSBURG FL 33707	
31 TITLE	S/T	☐ Change ☒ Addition
32 NAME	MARION L. SAMSON-JOSEPH	
33 STREET ADDRESS	6950 CENTRAL AVENUE, SUITE 160	
34 CITY ST ZIP	ST. PETERSBURG FL 33707	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: [signature] 3/6/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Daytime Phone