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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000072380

1. Corporation Name

WORLD I	Famous Bull Tavern, in	VC.					
Principal Place	of Business	Mailing Address		-	1 1991 110 1evit aven ann ann an	ili i4818 man m	1911 4811 1881
7217 ATLANTIC BLVD		7217 ATLANTIC BLVD		• •			
JACKSONVILLE FL 32211		JACKSONVILLE FL 32211		DO NOT WRITE IN THIS SPACE			
						115 SPACE	
					3. Date Incorporated or Qualifed 10/03/1994		
		a 54-31 Address			4. FEI Number	ΙΔn	plied For
	lace of Business	2a. Mailing Address			59-3272526	<u> </u>	t Applicable
Suite, Apt.	4	Suite, Apt. #, etc.			39 3212320	\$8.75	
—	#, <del>e</del> .c.	27			5. Certificate of Status Desired	- Fee Re	
City & State		City & State		6. Election Campaign Financing	\$5.00	May Be	
23		28		Trust Fund Contribution	Added 1	, ,	
Zip	Country	Zip	Country		8. This corporation owes the current year	Intangible	
24	25	29	30		Personal Property Tax.	Yes	□No
,	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Register	ed Agent	
			81	Name		•	
	KINS, ALBERT E		82	Street Add	ress (P.O. Box Number is Not Acceptable)		
	DERHOLD RD		-	00017.144			
JACK	(SONVILLE FL 32216		83		121 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
			84	City	20 12 12 12 12 12 12 12 12 12 12 12 12 12	85 Zip	Code 44.5
					,	• <b>L</b> "   "	
office or re	enistered agent or both in the State	of Florida, Such change was aut	tnonzea by	the corporati	poration submits this statement for the purpose ion's board of directors. I hereby accept the ap	e of changing its pointment as re	registered gistered
office or re agent. I as	egistered agent, or both, in the State m familiar with, and accept the obliga Signature, typed or printed name of registered age	of Florida, Such change was autations of, Section 607.0505, Floridant and title if applicable. (NOTE: F	tnorized by da Statutes	the corporati	red when reinstating)  DATE	politicate do lo	gistorou
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CITY-ST-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 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, with all other like empowered.

**FILED** 

Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90209 021 \*\*\*150.00