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

PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 13 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1998 DIVISION OF CORPORATIONS							Scoretary of State	
DOCUMENT # P9400073748 (3) CAFE THIRTY-A, INC.								
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B 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- (5)							
Principal Place of Business Mailing Address								
3899 E. CO. SEAGROVE 8	MWT 3U-A BEACH FL 324	59		3899 E. CO. HWY 30-A SEAGROVE BEACH FL 32459				
US			US	US				DO NOT WRITE IN THIS SPACE
								3. Date Incorporated or Qualified 10/03/1994
2. Principal P	lace of Busin	ess	2a. N	2a. Mailing Address				4. FEI Number Applied For
21				26				59-3275122 Not Applicable
Suite, Apt.	#, 0 10.		├ ~,	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Regulard
City & State	е			City & State				Election Campaign Financing \$5.00 May Be
23			28		-r			Trust Fund Contribution Added to Fees
Zip	}	Country 25	29 Z	ip	Cou	ntry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24		and Address of Ci		red Agent	[30]			10, Name and Address of New Registered Agent
RO	BERTS, HA	RRIET C				81	Name	,
3692 E. COUNTY HWY 30-A UNIT 1						82 Street Address (P.O. Box Number is Not Acceptable)		
						83		
SEAGROVE BEACH FL 32459								
						84	City	FL 85 Zip Code
11. Pursuant	to the provisi	ons of Sections 607	.0502 and 607.	1508, Florida Statu	ites, the ab	ove	named cor	orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
agent. I a	egistered age m fa miliar wit	ent, or both, in the t h, and accept the c	state of Florida. obligations of, S	Such change was Section 607.0505, F	autnorized Iorida Stati	utes	the corpora i.	ration's board of directors. I hereby accept the appointment as registered
SIGNATURE				1.11				
Signature, typed or printed name of registered agent at 12. OFFICERS AND D							N eignature requ	quired when reinslating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D			DELETE	1.1 T)T	LE		Change Addition
NAME	ROBERT		1.21					
STREET ADDRESS		COUNTY HWY 3		JNIT 1			ADDRESS	
CITY-ST-ZIP	SEAGRO	WE BEACH FL 32	2459		1.4 CIT	_	[-ZIP	
TITLE				L_) DELETE	2.1 TIT		1	L_] Change L_] Addition
NAME					2.2 NA			
STREET ADDRESS					•		ADDRESS	
CITY - ST - ZIP TITLE				DELETE	2. 4 CC 3.1 TIT		1-217	Change Addition
NAME				_	3.2 NA	ME	1	,
STREET ADDRESS					3.3 STF	REET	ADDRESS	Ì
CITY-ST-ZIP					3.4. CI	IY-S	T-ZIP	
TITLE				☐ DELETE	4.1 TIT	LE		Change Addition
NAME					4. 2 NA	ME		}
STREET ADDRESS							ADDRESS	
CITY-ST-ZIP				DELETE	4.4 CIT		- ZIP	Change Addition
TITLE NAME				- Dutter	5.1 TIT		ļ	L. Change L. Addition
STREET ADDRESS							ADDRESS	
CITY-ST-2IP					5.4 CIT		l l	
TITLE				DELETE	6.1 7(7)		-"	Change Addition
NAME					6.2 NA	MΕ	ĺ	
STREET ADDRESS					6.3 STF	EET A	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 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 atlachment with an address.

6.4 CITY - ST - ZIP