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APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT
1995



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

95 JAN 23 PH 2:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000075695 (4)

1. Corporation Name

SUNRISE GRILL, INC.

Principal Place of Business

1289 OLD MOUNT DORA ROAD
EUSTIS FL 32726

Mailing Address

1289 OLD MOUNT DORA ROAD
EUSTIS FL 32726

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/13/1994

3a. Date of Last Report

2. Principal Place of Business

21 462 E. Burleigh Blvd

2a. Mailing Address

26 Suite, Apt. #, etc.

4. FEI Number

69-3272771

Applied For

Not Applicable

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

City & State

23 TAVARES, FL

City & State

28

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

Zip

24 32778

Country

25 Lake

Zip

29

Country

30

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BLANCHARD, CLAYTON H JR
35 E PINEHURST BLVD
EUSTIS FL 32726

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 607.1505, Florida Statutes.

SIGNATURE

Clayton H. Blanchard Jr.

1/16/95

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
VIOLA, HELEN
1289 OLD MOUNT DORA ROAD
EUSTIS FL 32726

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
S/T/D
Viola, Helen
1289 Old Mt. Dora Rd
EUSTIS, FL 32726
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
P/D
Viola, Andrew H.
1289 Old Mt. Dora Rd
Eustis, FL 32726
☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
1/25
☐ Change ☐ Addition

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)(b), 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Helen Viola, Secretary/Treas.

1/16/95

904-589-919

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number

Helen Viola, Secretary/Treasurer