


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 07, 2004 08:00 AM
Secretary of State

DOCUMENT # P94000091635 1. Entity Name BALLYHOO GRILL, INC.	
---	---

Principal Place of Business 900 PINELLAS AVE. TARPON SPRINGS, FL 34689	Mailing Address 900 PINELLAS AVE. TARPON SPRINGS, FL 34689
--	--



07012004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3289721	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent JOSEPH, JUSTIN G 1266 SOUTH PINELLAS AVENUE TARPON SPRINGS, FL 34689
--

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signed, typed or printed name of registered agent and fee (if applicable) (NOTE: Registered Agent signature required when re-statuting) DATE _____

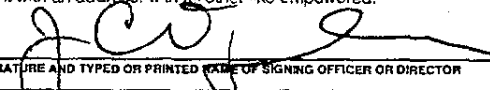
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	VP FRAGALE, CHRIS 1671 SAND HOLLOW LANE PALM HARBOR, FL
TITLE NAME STREET ADDRESS CITY ST ZIP	TD FRAGALE, DEBORAH 1671 SAND HOLLOW LN. PALM HARBOR, FL
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	

DO NOT WRITE IN THIS SPACE

000000163490
07/07/04-80004-023 550.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **6-30-04**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date in Print