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

Apr 21 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P95000013089 (4) BANANA'S RESTAURANT & LOUNGE, INC. Mailing Address Principal Place of Business 3904 S. TAMIAMI TRAIL 3804 S. TAMIAMI TRAIL SARASOTA FL 34231 SARASOTA FL 34231 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/13/1995 2. Principal Place of Business 2a. Mailing Address **Applied For** 26 65-0556000 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees 23 Cotry 8. This corporation owes or has paid the current year Intangible Zip Country 30 Personal Property Tax due June 30. 29 Yes 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WORKMAN, DONNA J 3904 S. TAMIAMI TRAIL 82 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34231 83 14 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Sistures, the office or registered agent, or both, in the State of Florida. Such change was authoric by the corporation's board of directors. I hereby accept the appointment as registered agent, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida 9 (e.g.) SIGNATURE Signature, typed or printed name of registered agent and title if applicable igent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. RESIDENT DONNA J DELETE Change TITLE WORKMAN, DONNA J EASTON STREET NAME 1 :ET ADDRESS 3904 S. TAMIAMI TRAIL STREET ADDRESS SARASOTA FL 34231 ÅY-ST-ZIP CITY-ST-ZIP DELETE TLE Change Addition TITLE 4ME NAME TREET ADDRESS STREET ADDRESS ITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition TLE TITLE **IME** NAME REFT ADDRESS STREET ADDRESS JTY-ST-ZIP CITY-ST-ZIP DELETE Change Addition ΠĒ TITLE AME NAME REFY ADORESS STREET ADDRESS JY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE NAME

14. I hereby certify that the information supplied with this iting does not qualify for thimption 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 accurat 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 execuse report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607.

REET ADDRESS

JY - ST - ZIP

LĒ

ME Xeet address

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

TITLE

4-1

4-13-98 941-924-2056

Dallo Dayline Proce 6 0450668

Change

Addition

FILED