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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P95000057926 (4)

BEEFS ONE, INC.

Principal Pla	on at Business	Mailing Address					
Principal Place of Business 11274 W HILLSBOROUGH AVE TAMPA FL 33635 US		4230 S MACDILL AVE SUITE E			DO NOT WRITE IN THIS SPACE		
03		TAMPA FL 33611 US			3. Date Incorporated or Qualified		
					07/26/1995		
·	2. Principal Place of Business 2a. Mailing Address				4. FEI Number Applied		
21 26		· · · · · · · · · · · · · · · · · · ·			D0 00 10000	Not Applicable	
Suite, Apt. #, etc		Suite, Apt. #, etc.	Surie, Apt. #, etc.		5. Certificate of Status Desired See Regulred		
City & Sta	ate	City & State			6. Election Campaign Financing \$5.00 May !		
23		28			Trust Fund Contribution Added to Fee		
Zip	Country	Zip	Cou	ntry	8. This corporation owes or has paid the current year Intangible		
24	25	29	30		Personal Property Tax due June 30. Yes No		
	g. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered Agent		
	rong, gary			81 Name			
11274 W HILLSBOROUGH AVE TAMPA FL 33635				82 Street A	Address (P.O. Box Number is Not Acceptable)		
1,5	WIFA FL 33033			83	· · · · · · · · · · · · · · · · · · ·		
				84 City	 85 Zip Code		
					FL T		
office or agent. I SIGNATURE	am ramiliar with, and accept the oblig	jations or, Section 607.0505, I	Florida Stat	ules.	corporation submits this statement for the purpose of changing its regis poration's board of directors. I hereby accept the appointment as regist	ered	
12.	Signature typed or printed name of registered ap	ent and title if applicable (N ID DIRECTORS	OTE Registered	Agent signature	required when reinslating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	-	
TITLE	P	DELETE	1.1.10	LE I		Addition	
NAME	DORMAN, TED		1.2 N/	IME			
STREET ADDRESS		E	1.3 ST	REET ADDRESS			
City-St-ZIP	TAMPA FL		1.4 Cf	TY-ST-ZIP			
TITLE	D	DELETE	2.1 TI	'LE	☐ Change ☐ /	Addition	
NAME	STRONG, GARY		2.2 NJ	ME			
STREET ADDRESS		E	2.3 ST	reet address			
CITY-ST-ZW	TAMPA FL			TY-ST-ZIP			
TITLE		☐ DELETE	3.1 Til	į.	☐ Change ☐ /	Addition	
NAME CTREET ADDRESS			3.2 NA				
STREET ADDRESS				REET ADORESS			
CITY-ST-ZIP TITLE		DELETE	3.4. C	TY-\$T-ZIP	Change 1	Addition	
NAME			4.2 N		ر سے درس اور درسی اور		
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP				TY-ST-ZIP			
TITLE		☐ DELETE	5.1 TIT	-	☐ Change ☐ A	Addition	
NAME			5.2 NA	ME		ŀ	
STREET ADDRESS			5.3 ST	REET ADDRESS		Į	
CITY-ST-ZIP			5.4 CI	TY-ST-ZIP	<u>_</u>		
TITLE		DELETE	6.1 TIT		☐ Change ☐ A	Addition	
NAME			6.2 NA				
CYPEET ADVOCCE			-	DEET ANABESS			

14. Thereby 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 informatindicated on this annual report or supplied initial initial report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am at officer or director of the corporation or his 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 champed, or git an audicument with an address.

813-854-1868

FILED

May 12 1998 8:00am

Secretary of State