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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 02 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

	MENT # P95000 OCK SPORTS BAR & GRIL				2011 1200 A 1410 B 1410 A 1410 1411 1411	
Principal Place of Business Mailing Address				- I HERVIER IN HERVE BINN BONK COM BEHI BEIN HERVE HINE AND		
8203 EAST OR FLORAL CITY F		309 E. ORANGE AVE FLORAL CITY FL 34436				
				3. Date Incorporated or Qualified 09/20/1995	3a. Date of Last Report 03/30/1996	
2. Principal F	lace of Business	2a. Mailing Address	·····	4. FE! Number	Applied For	
21		26		59-3334555	Not Applicable	
Suite, Apt η	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22 City & Stat		City & State			Fee Required	
City & Stat	IC	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
23] 7)p	Country	Zip	Country	8. This corporation has liability for		
24	25	29	30		Yes No	
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Re	gistered Agent	
11. Pursuant office or agent 12	to the provisions of Sections 607 0 registered agent, or both, in the St am familiar with, and accept the ob	502 and 607.1508, Florida Stat ate of Florida. Such change was ligations of, Section 607.0505, F	les, the above-named corse authorized by the corpora forida Statules.	rporation submits this statement for the pation's board of directors. I hereby accep	purpose of changing its registered of the appointment as registered	
	Stgeature, typed or pricted came of majistered		OTE: Registered Agent signature requ		DATE	
12.	TE:	AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12	
TITLE	D RUGGIERO, ANTHONY	ריז הנדגונ	1.1 TITLE 1.2 NAME		□ Cuante □ vocilion	
NAME STREET ADDRESS	114 WEST QUINCE STREET		1.3 STREET ADDRESS	:		
CITY-ST-ZIP	HERNANDO FL 34442		1.4 CITY-ST-ZIP	1		
TIFLE		DELETE	2.1 TITLE	:	Change Addition	
NAME			2.2 NAME	;		
STREET ADDRESS	!		2 3 STREET ADDRESS			
C17Y-S1-7iP			2 4 CITY+ST-ZIP	1		
Tifle	;	☐ DELETE	3.1 TITLE	i,	Change Addition	
NAME			3.2 NAME	•		
STREET ADORESS	,		3.3 STREET ADDRESS			
011Y - S7 - 71P		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	 	Change Addition	
TITLE NAME		المروزية المروزية	4.1 117LE	•	i Change Change	
STREET ADDRESS			4.3 STREET ADDRESS			
City-St-7iP			4.4 CITY- ST- ZIP			
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CHY-ST-ZIP			5.4 CITY-ST-ZIP	and the second s		
3,111,1		DELETE	6.1 TITLE	and the second	Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
Dary St. 7-0			GACITY_ST_2ID			

14. Ido hereby certify that the information supplied with this filing does not quality 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 Brock 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Comparison

Comparison