

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT



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

~~1996~~ 1997

DOCUMENT # **PA50000074810**

1. Corporation Name

Dave & Buster's of Florida, Inc.

Principal Place of Business

Mailing Address

3000 Oakwood Blvd.
Hollywood, FL 33020

2751 Electronic Lane
Dallas, Texas 75220

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97 MAY 27 PM 2:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

21 3000 Oakwood Blvd.

Suite, Apt. #, etc.

22 N/A

City & State

23 Hollywood, FL

Zip

24 33020

Country

25 USA

2a. Mailing Address

26 2751 Electronic Lane

Suite, Apt. #, etc.

27 N/A

City & State

28 Dallas, Texas

Zip

29 75220

Country

30 USA

3. Date Incorporated or Qualified

09/27/95

3a. Date of Last Report

N/A

4. FEI Number

58-2223494

Applied For

Not Applicable

5. Certificate of Status Desired

☐ No

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐ No

\$5.00 May Be
Added to Fees

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

9. Name and Address of Current Registered Agent

Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301

10. Name and Address of New Registered Agent

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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE President ☐ DELETE

NAME David O. Corriveau
STREET ADDRESS 38 Downs Lake Circle
CITY, ST, ZIP Dallas, Texas 75230

TITLE Vice President ☐ DELETE

NAME Charles (nmn) Michel
STREET ADDRESS 4104 Dundee
CITY, ST, ZIP Plano, Texas 75093

TITLE Secretary ☐ DELETE

NAME Alan L. Murray
STREET ADDRESS 5718 Brushy Creek Trail
CITY, ST, ZIP Dallas, Texas 75252

TITLE Treasurer ☐ DELETE

NAME Charles (nmn) Michel
STREET ADDRESS 4104 Dundee
CITY, ST, ZIP Plano, Texas 75093

TITLE Director ☐ DELETE

NAME David O. Corriveau
STREET ADDRESS 38 Downs Lake Circle
CITY, ST, ZIP Dallas, Texas 75230

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)