## 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 # P95000091167 (3)

LOCOS PUB AND GRILL, INC.

Principal Place of Business Mailing Address UCF STUDENT UNION 13540 DORNOCK DR BUILDING 52. SUITE 108 ORLANDO FL 32828 ORLANDO FL 32816

## FILED Jan 29 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/28/1995 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 21 59-3436502 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Žip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MONACO, DEAN 13540 DORNOCK DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32828 83 **B4** City Zip Code 85 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 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. CVI DELETE Change Addition TITLE 1.1 TITLE MONACO, DEAN NAME 1.2 NAME 13540 DORNOCK DRIVE STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32828 CITY-ST-ZIP 1.4 CITY-ST-ZIP DFLETE Change \_\_\_ Addition TITLE 2.1 TITLE Scott KAYlor 2.2 NAME 13540 Dornock Dr. STREET ADDRESS 23 STREET ADDRESS orlando FL. 32828 CITY-ST-ZIP 2 4 CITY-ST-ZIP ☐ DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition ☐ Change 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 53 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - S1 - ZIP CITY-ST-ZIP

14. I hereby 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 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, on an attachment with an address

1/20/98

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