SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Oct 07 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

P96000009742 (3)

MUSTARD'S LAST STAND OF ST. PETERSBURG, INC.

Principal Place of Business Mailing Address	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/31/1996 4. FEI Number Applied For Not Applicable.
ST. PETERSBURG FL 33701 US 2. Principal Place of Business 21 Suite, Apt. #, etc. Suite, Apt. #, etc.	3. Date Incorporated or Qualified 01/31/1996 4. FEI Number Applied For 59-3360515 Not Applicable
26 Suite, Apt. #, etc. Suite, Apt. #, etc.	4. FEI Number Applied For 59-3360515 Not Applicable
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.	59-3360515 Not Applicable
Suite, Apt. #, etc.	
27	5. Certificate of Status Desired \$8.75 Additional
	Fee Required
City & State City & State	6. Election Campaign Financing \$5.00 May Be
23 28	Trust Fund Contribution Added to Fees
	Intry 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
4	Personal Property Tax due June 30. L_J Yes No 10. Name and Address of New Registered Agent
	B1 Name
VAN KESTEREN & WATTS, P.A.	
721 FIRST AVE NORTH	82 Street Address (P.O. Box Number Is Not Acceptable)
ST PETERSBURG FL 33701	83
	85 Zip Code
 Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the ab office or registered agent, or both, in the State of Florida. Such change was authorized agent. I am familiar with, and accept the obligations of, section 607.0505, Florida State 	ove-named corporation submits this statement for the purpose of changing its registered d by the corporation's board of directors. I hereby accept the appointment as registered tutes.
SIGNATURE	ered Agent standure required when rejustating) DATE
Signature, typed or printed name of registered agent and little if applicable. (NOTE: Register 12. OFFICERS AND DIRECTORS 13.	ered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TILE VD DELETE 1.111	
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NAME FRANCIS, ASA 22 NA	, 7
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