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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000014890

HAMMERHEAD FRED'S, INC.

FILED Mar 30, 1999 8:00 am Secretary of State

03-30-1999 90042 027 ***150.00



| Principal Place of Business Mailing Address | | | | | | | F 11911 W/WW1 107 | 14 12(1) 32(1) 100) | |
|---|--|---------------|------------------------|---------------|-----------------|----------------------|---|-------------------------------|-----------------------------|
| 15606 FRONT BEACH RD 15606 FRONT BEACH RD PANAMA CITY BEACH FL 32413 PANAMA CITY BEACH FL 324 | | | | 32413 | | | DO NOT WRITE IN THI | S SPACE | |
| | | | | | | | 3. Date Incorporated or Qualifed | | |
| | | | | | | | 02/14/1996 | | |
| 2. Principal Place of Business 2a. Mailing Address | | | | | | | 4. FEI Number | 1 | Applied For |
| 21 | | 26 | • | | | | 59-3356783 | T | Not Applicable |
| Suite, Apt. | #. etc. | | Suite, Apt. #, etc. | | | | | \$8.75 | Additional |
| 22 | 27 | | | | 242 | | 5Certifcate of Status Desired | Fee F | Required |
| City & State |) | | City & State | | | | 6. Election Campaign Financing | \$5.00 | May Be |
| 23 | | 28 | | | | | Trust Fund Contribution | Added | d to Fees |
| Žip | Country | | Zip | Cou | intry | | 8. This corporation owes the current year li | ntangible | _ |
| 24 | 25 | 29 | | 30 | | | Personal Property Tax. | Yes | □No |
| | 9. Name and Address of Curre | nt Regi: | stered Agent | | <u> </u> | | 10. Name and Address of New Registered | Agent | |
| | | | | | 81 | Name | | | |
| BENNETT, DERRICK | | | | | 82 | Street Addr | ess (P.O. Box Number is Not Acceptable) | | |
| 112 E 3RD CT | | | | | | | | | |
| PAN/ | AMA CITY FL 32401 | | | | 83 | | | | |
| } | | | | | 84 | City | | 85 Zir | o Code |
| | | | | | | , | F | L | |
| office or re agent. I ar | to the provisions of Sections 607.05 egistered agent, or both, in the State in familiar with, and accept the oblig | of Flori | ida. Such change was : | authonzei | าทา | the corporation | oration submits this statement for the purpose on's board of directors. I hereby accept the app | f changing i pintment as i | ts registered registered |
| SIGNATURE | Signature, typed or printed name of registered ago | ent and title | if applicable. (NOT | E: Registered | Ager | nt signature require | d when reinstating) DATE | | |
| 12. | OFFICERS A | ND DIRI | ECTORS | 13. | | | ADDITIONS/CHANGES TO OFFICERS A | | |
| TITLE | D | | ☐ DELETE | 1.1 Π | TLE | | | Change | e 🗌 Addition |
| NAME | BENNETT, MICHAEL R | | | 1.2 N | AME | | | | (|
| STREET ADDRESS | 15606 FRONT BEACH RD | | | 1.3 S | TREET | TADDRESS | | | |
| CITY-ST-ZIP | PANAMA CITY BEACH FL 324 | 113 | | 1.4 C | TY-S | T-ZIP | | | |
| TITLE | D | | ☐ DELETE | 2.1 T | TLE | | | Change | e 🗌 Addition |
| NAME | BENNETT, SAMUEL N | | | 2.2 N | AME | | | | |
| STREET ADDRESS | 15606 FRONT BEACH RD | | | 2.3 S | TREE | TADDRESS | | | ļ |
| CITY-ST-ZIP | PANAMA CITY BEACH FL 324 | 113 | | 2.40 | ITY-S | ST- ZIP | | | |
| TITLE | | | ☐ DELETE | 3.1 T | TLE | | | Change | e 🗀 Addition |
| NAME | | | | 3.2 N | AME | | | | |
| STREET ADDRESS | | | • | 3.3 \$ | TREE | T ADDRESS | | | ļ |
| CITY-ST-ZIP | | | | 3.4. 0 | my-s | ST-ZIP | • | | |
| TITLE | | | ☐ DELETE | 4,1 ↑ | TLE | | | ☐ Change | e ☐ Addition |
| NAME | | | | 4.21 | IAME | | | | |
| STREET ADDRESS | | | | 4.3 S | TREE | T ADDRESS | | | } |
| CITY-ST-ZIP | | | | 440 | ITY-\$ | T-ZIP | | | |
| TITLE | | | ☐ DELETE | 5.1 T | TLE | | | Change Change | e 🔲 Addition |
| NAME | | | | 5.2 N | AME | Ţ | | | |
| STREET ADDRESS | | | | 5.3 S | TREE | TADDRESS | | | |
| CITY-ST-ZIP | | | | 5.4 C | ITY-S | T-ZIP | | | |
| TITLE | | | ☐ DELETE | 6.1 T | ITLE | | | Change | e 🔲 Addition |
| NAME | | | | 6.2 N | AME | | | | |
| STREET ADDRESS | | | | 6.3 S | TREE | TADDRESS | | | |
| | | | | 1 440 | mv e | T. 710 | | | |

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, or on an attachment with an address, with all other like empowered.

SIGNATURE: