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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME

STREET ADDRESS City-St-Zip



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 27 1998 8:00am

Secretary of State

s legender fin 1935 nicht gante dater durch nacht zielb i erähl bärlig fallg fällt fällt.

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000021099 (2)

NICK'S PIZZA PASTA & GRILL, INC.

Principal Place of Business Mailing Address						
1964 LAKE WORTH ROAD LAKE WORTH FL 33461-4228		PO BOX 1120 BOCA RATON FL 33429				
US		US		DO NOT WRITE IN THIS SPACE		
		••			3. Date Incorporated or Qualified	
					03/07/1996	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0673225	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27				Fee Required
City & State		City & State		Election Campaign Financing	\$5.00 May Be	
23		28	1 6-		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Cour	ııry	8. This corporation owes or has paid the	current year Intangible Yes No
24	25] 9. Name and Address of Current	29 29 Agent	30]		Personal Property Tax due June 30. 10. Name and Address of New Registers	
GROSCH, RICK 81 Name						
2124 NORTHEAST 44TH STREET						
	RT LAUDERDALE FL 33308			82 Street Ac	dress (P.O. Box Number is Not Acceptable)	
10	HI ENOBERIDALE I E 00000		ŀ	83		
			Ļ			
				84 City	F	B5 Zip Code
11. Pursuant	to the provisions of Sections 607.050?	and 607 1508, Florida Statut	es, the ab	ove-named co	orporation submits this statement for the purpose ration's board of directors. I hereby accept the a	e of changing its registered
agent. La	egistered agent, or both, in the state m fa miliar with, an <mark>d accept the obliga</mark>	tions of, Section 607.05 05 , Fl	aumonzec orida Stati	i by trie corpoi ites.	ration's board of directors. I hereby accept the a	appointment as registered
SIGNATURE						
	Signature, typed or printed name of registered ages OFFICERS AND			Agent signature rec	quired when re-estating) OATI	
12.	P OFFICERS AND	DELETE	13. 1.1 I/I	. T	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	STELLINO, FRANK	L otter	1.0 NA			
STREET ADDRESS	2124 NORTHEAST 44TH STRE	ET		NEET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL 33308			Y-ST-ZIP		
TITLE	ST DELETE		21117			Change Addition
NAME			2 2 NA			
STREET ADDRESS	AAAA MADTI WAATA AATA ATTOPPET			HEET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL 33308			Y-SY-ZIP	. •.	
TITLE	V DELETE		3 1 T(T)			Change Addition
NAME	BRACEY-GIBBON, SHELBY		3 2 NA	ME		
STREET ADDRESS	2124 NORTHEAST 44TH STRE	ET	3 3 STF	IEET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL 33308	;	3.4. CIT	Y - ST - ZIP		
TITLE	DELETE		4.1 Titl			Change Addition
NAME			4. 2 NA	ME		
STREET ADDRESS			4.3 STF	REET ADDRESS		
CITY-ST-ZIP			4.4 CIT	Y - ST - ZIP		
TITLE	DELETE 5.		5.1 TIT	.E		Change Addition
NAME			5.2 NA	ME		
STREET ADDRESS			5.3 STF	REET ADDRESS		
CiTY-ST-ZIP			5.4 CIT	Y - ST - ZIP		
TITLE		☐ DELETÉ	6.1 T(T)	.E]		Change Addition

6.2 NAME 6.3 STREET ADDRESS

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.