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PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT #
1. Corporation Name

NEWK'S CAFE, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

2. Principal Place of Business

21 514 Channelwide Dr.

Suite, Apt. #, etc.

22 City & State

23 Tampa, FL

24 33602

25 U.S.A.

2a. Mailing Address

26 P.O. Box 10965

Suite, Apt. #, etc.

27 City & State

28 Tampa, FL

29 33679

30 U.S.A.

3. Date Incorporated or Qualified
3/15/96

3a. Date of Last Report
'96

4. FEI Number

59-3365569

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$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

10. Name and Address of New Registered Agent

81 Name

JACK F. NEWKIRK

82 Street Address (P.O. Box Number is Not Acceptable)

3707 W. Platt St.

83

84 City Tampa

FL

85 Zip Code 33609

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: Jack F. Newkirk - JACK F. NEWKIRK

6-29-97

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

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

11.1 JACK F. NEWKIRK
3707 W. Platt St.
Tampa, FL 33609

TITLE NAME STREET ADDRESS CITY-ST-ZIP

11.2 V.P. ANDY A. DELAPORTE
17021 Shady Aves Dr.
Lutz, FL 33614

TITLE NAME STREET ADDRESS CITY-ST-ZIP

11.3 V.P. WILLIAM GIESEKING
961 WICKET RUN DR.
Brandon, FL 33510

TITLE NAME STREET ADDRESS CITY-ST-ZIP

11.4 V.P. GARY A. PITTMAN
4476 W. SWANN AVE.
Tampa, FL 33609

TITLE NAME STREET ADDRESS CITY-ST-ZIP

11.5

TITLE NAME STREET ADDRESS CITY-ST-ZIP

11.6

TITLE NAME STREET ADDRESS CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Change Addition

Change Addition

Change Addition

Change Addition

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14. I do 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

SIGNATURE:

Jack F. Newkirk

JACK F. NEWKIRK

6-29-97

(813)-875-3679

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)



June 29, 1997

514 Channelside Drive
Tampa, FL 33602
(813) 307-NEWK

Florida Department of State
DIVISION OF CORPORATIONS
P.O. Box 6327
Tallahassee, FL 32314

This form was requested on 6/26/97, and received and returned on 6/29/97. No previous form was received.

Please find NEWK'S check for \$165 enclosed.

Thank you very much for your assistance.

Sincerely,

Jack F. Newkirk, Pres.
NEWK'S Cafe, Inc.
P.O. Box 10965
Tampa, FL 33679

Ph: 813-875-3679