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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT C

Sandra B. Morth

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P96000030436 (5)

BEACHSIDE GRILL, INC.

FILED
May 18 1998 8:00am
Secretary of State



	·									[8 B]] [8 B]	
Principal Place of Business Mailing Address) (001(00) (10 18310 B11() 60(1) 60(1)			IA BIII IBAL	
10557 ORANG SEMINOLE FL	E BLOSSOM LANE 34642		10557 ORANGE BLOSSOM LANE SEMINOLE FL 34642				DO NOT WOIT	E IN 1 72 110 00			
						-	DO NOT WRIT Date Incorporated or Qualified	E IN THIS SP	4CE		
						"	04/02/1996				
2. Principal Place of Business 2a.			Mailing Address			4	FEI Number		I An	plied For	
21			_				59-3368522		Not Applicable		
Suite, Apt. #, etc. Su			uite, Apt. #, etc.				, Certificate of Status Desired		\$8.75	Additional	
22 27			<u> </u>			3	, Certificate of Status Desired		Fee Re	quired	
City & State)	<u>-</u> ₁ ′	City & State			6	, Election Campaign Financing		\$5.00		
23		28					Trust Fund Contribution		Added t		
Zip	Country	Zip	<u> </u>	Country	4	В	This corporation owes or has p			angible] No	
24	25 9. Name and Address of Curr	29 ent Registered A	oent 3	<u>oj</u>		10	Personal Property Tax due Jun Name and Address of New R) INO	
ADG	RGIS, MARY ANN	• · · · · · · · · · · · · · · · · · · ·		81	Nam		, , , , , , , , , , , , , , , , , , , ,	3.0.0.0.0	<u></u>		
	57 ORANGE BLOSSOM LANE				Ctune		D.O. Boy Mireshay in Mat Assault	h.l.			
SEMINOLE FL 34642				82	Stree	eet Address (P.O. Box Number is Not Acceptable)					
				63	ļ	······································		•••		-	
				84	City		и		85 Zip (Code	
		· · · · · · · · · · · · · · · · · · ·			1			FL			
11. Pursuant to office or readent. I ar	o t he provisions of Sections 607.0 ggi ster ed agent, or both, in the Sta m fam iliar with, and accept the obl	502 and 607.1508 Te of Florida, Such Igations of, Section	i, Florida Statutes h change was aut on 607.0505, Florid	, the abov thorized b da Statute	e-name y the co s.	d corporation's	on submits this statement for the board of directors. I hereby acce	purpose of chept the appoin	nanging it itment as	s registered registered	
SIGNATURE	Signature, typed or printed name of registered a	and and then the annual con-	75/2/16 S	Dogistored Ac	ant cionat	ire required whe	a selection.	DATE			
12.		ND DIRECTORS	ne project	13.	citt signatt	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFI	***	IRECTOR	S IN 12	
TITLE	· P		DELETE	1.1 TITLE					Change	Addition	
NAME	APERGIS, MARY ANN			1.2 NAME							
STREET ADDRESS	10557 ORANGE BLOSSOM	LANE	1.3 5		1.3 STREET ADDRESS						
CITY-ST-ZIP	\$E MINOLE FL 34642			1.4 CITY-	ST-ZIP						
TITLE	\$		☐ DELETE	2.1 TITLE					Change	☐ Addition	
NAME	APERGIS, KONSTANTINOS		2.2 N		2.2 NAME						
STREET ADDRESS	10557 ORANGE BLOSSOM	LANE		2.3 STREE	STREET ADDRESS						
CITY-ST-ZIP	SE MINOLE FL 34642		T Spiere	2. 4 CITY-	ST-ZIP				12.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
TITLE			DELETE	3.1 TITLE				L	Change	Addition	
NAME				3.2 NAME							
STREET ADDRESS				3.3 STREET		' 					
CITY-ST-ZIP TITLE			DELETE	3.4 CITY- 4.1 TITLE	SI-ZIP				Change	Addition	
NAME				4. 2 NAME	•			_	, onango	_ Addition	
STREET ADDRESS				4.3 STREE	ADDRESS	.					
CITY-ST-ZIP				4.4 CITY-1							
TITLE			DELETE	5.1 TITLE		1			Change	Addition	
NAME				5.2 NAMÉ					-		
STREET ADDRESS				5.3 STREET	ADDRESS	;					
CITY-ST-ZIP				54 C Y-	ST - ZIP						
TITLE			☐ DELETE	6.1 TI LE					Change	Addition	
NAME				62 N ME							
STREET ADDRESS				6.3 S REET	ADDRESS	: [ĺ	
CITY-ST-ZIP		**************************************	·····	6.4 CiTY - 5		1					
44 I barabu a	ortify that the information cumpled	with this filing day	ac not avalify for t	the evenir	tion ata	tod in Pooli	on 110 07/2\(i\ Elorida Etatutoa	further seriff	dhat tha	information	

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.

SIGNATURE: MALL MAJOUR.

5-3-98 4620136