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).

FILED
Oct 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT

1998

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

DOCUMENT # **P96000031049 (5)**

1. Corporation Name

BLUE PARROT BAR, INC.

Principal Place of Business	Mailing Address
6121 4 STREET NORTH ST PETERSBURG FL 33703	6121 4 STREET NORTH ST PETERSBURG FL 33703

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip 24 Country 25

2a. Mailing Address
26 c/o Eco Sound Inc
Suite, Apt. #, etc.
27 39 Oscar Hill Rd
City & State
28 Tarpon Springs FL
Zip 29 34689 Country 30

3. Date Incorporated or Qualified
04/01/1996

4. FEI Number
59-3372946
☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

DEVEREAUX, RICHARD W
29824 70TH ST. N. #1
CLEARWATER FL 34621

10. Name and Address of New Registered Agent

81 Name Alain Grainger
82 Street Address (P.O. Box Number is Not Acceptable)
4126 4th Ave N.
83
84 City St. Petersburg FL 85 Zip Code 33713

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 A. H. G. ALAIN H. GRAINGER 9/22/98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	☐ DELETE	1.1 TITLE DP ☒ Change ☐ Addition
NAME	BELENSKI, PAMELA G		1.2 NAME Alain Grainger
STREET ADDRESS	6121 4 STREET NORTH		1.3 STREET ADDRESS 4126 4th Ave N
CITY-ST-ZIP	ST PETERSBURG FL 33703		1.4 CITY-ST-ZIP St Petersburg, FL 33713
TITLE		☐ DELETE	2.1 TITLE ☐ Change ☐ Addition
NAME			2.2 NAME
STREET ADDRESS			2.3 STREET ADDRESS
CITY-ST-ZIP			2.4 CITY-ST-ZIP
TITLE		☐ DELETE	3.1 TITLE ☐ Change ☐ Addition
NAME			3.2 NAME 000000265782
STREET ADDRESS			3.3 STREET ADDRESS -10/07/98--01060--043
CITY-ST-ZIP			3.4 CITY-ST-ZIP ***558.75
TITLE		☐ DELETE	4.1 TITLE ☐ Change ☐ Addition
NAME			4.2 NAME
STREET ADDRESS			4.3 STREET ADDRESS
CITY-ST-ZIP			4.4 CITY-ST-ZIP
TITLE		☐ DELETE	5.1 TITLE ☐ Change ☐ Addition
NAME			5.2 NAME
STREET ADDRESS			5.3 STREET ADDRESS
CITY-ST-ZIP			5.4 CITY-ST-ZIP
TITLE		☐ DELETE	6.1 TITLE ☐ Change ☐ Addition
NAME			6.2 NAME
STREET ADDRESS			6.3 STREET ADDRESS
CITY-ST-ZIP			6.4 CITY-ST-ZIP

10/6

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: A. H. G. ALAIN H. Grainger 9/22/98 USR-5218

CR2E034 (5/98)