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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000047621 (3)

BLONDEE'S LOUNGE, INC.

Principal Place of Business 5450 N. ATLANTIC AVE.

Mailing Address

5450 N. ATLANTIC AVE. COCOA BEACH FL 32931-376

FILED May 13 1997 8:00am Secretary of State



OUCUN BEACH	FL 32831	OOOON BENOTI TE SESSI STO		No.	
		•		3. Date Incorporated or Qualified 05/31/1996	3a. Date of Last Report
	ace of Business	2a. Mailing Address	<u> </u>	4. FEI Number	Applied For
21 545	O N. ATLANTIC A	1026 127 W. VO	LASIA LN	. 59-34/8788	Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stati	BEACH, FL.	City & State 28 COCOA BE	ACH, FL.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zp	Country	Zip	Country	8. This corporation has liability for	ntangible tax under s. 199.032,
24 3 2	9, Name and Address of Curren) 29 3293) 30	O BREVARI	Florida Statutes 10. Name and Address of New Re	Yes No
		r negistered Agent	81 Name	10. Rame and Address of New Re	distated wilder
5450 N. ATLANTIC AVE.					
				62 Street Address (P.O. Box Number Is Not Acceptable)	
COU	OA BEACH FL 32931		B3		
			[53]		
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050:	2 and 607.1508, Florida Statutes	, the above-named cor	poration submits this statement for the p	purpose of changing its registered
office or r	egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was aut	thorized by the corpora	tion's board of directors. I hereby accep	ot the appointment as registered
SIGNATURE	Signature, typical or printed name of registered again		Registered Agent signature requ	<u> </u>	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TPLF	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	POTTER, CHARLOTTE A		1.2 NAME	-	
STREET ADDRESS	127 W. VOLUSIA LANE		1.3 STREET ADDRESS		
City - ST - 7IP	COCOA BEACH FL 32931		1.4 CiTY-ST-ZiP	The state of the s	
Juff	D	☐ DELETE	2.1 TITLE	·	Change Addition
NAME	rauli, roxanne		22 NAME		
STREET ADDRESS	144 W. OSCEOLA LANE		2.3 STREET ADDRESS		
CITY-ST-70P	COCOA BEACH FL 32931		2.4 CITY-ST-ZIP		
TOLE		DELETE	31 TITLE		Change Addition
NAME		-	3.2 NAME	•	- • -
STHEL* ADDRESS			3.3 STREET ADDRESS		
CHY-ST ZIP					·
MILE MILE		☐ DELETE	3.4. CITY-ST-ZIP		☐ Change ☐ Addition
NAMÉ		C. Section	1.5		C overige C > yourion
1			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CHY+ST-ZIP TITLE		DELETE	4.4 CiTY-ST-ZIP		Change
		L.J DECETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STEEL LADORESS			5.3 STREET ADDRESS		
City - St - ZiP			5.4 CITY-ST-ZIP		
300		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			6.4 CITY - ST - ZIP		
	by certify that the information supplier	with this filing does not qualify:		d in Section 119 07(3)(i). Florida Statute	s. I further certify that the

4. To hereby certify that the information supplied with this filing does not quality 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: (

Charlotte 1 1 Potts CHARLOTTE A. POTTER 5-1-97 (407) 184-0014