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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P96000050307**

SPITFIRE GRILL, INC.

Principal Place of Business

Mailing Address

10901-D ROOSEVELT BLVD #800

FILED Feb 16, 1999 8:00 am

Secretary of State

02-16-1999 90046 039 \*\*\*150.00

ST. PETERSBURG FL 33716		ST. PETERSBURG FL 33716 US				DO NOT WRITE IN THIS SPACE					
							Date Incorporated or Qualifed 06/10/1996				
2. Principal Place of Bu	usiness	2a. Mailing Address					FEI Number		L	Applied For	
1		26					65-0679 <u>187</u>			Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired   \$8.75 Addition Fee Required					
City & State		City & State				6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees					
Zip	Country 25	Zip Country 29 30				8. This corporation owes the current year Intangible Personal Property Tax.					
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
				81	Name					i	
FISHER, GREGORY H 5520 FIRST AVENUE NORTH ST. PETERSBURG FL 33710				82	82 Street Address (P.O. Box Number is Not Acceptable)						
				83		· 经营工的 经有效 化二甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基					
				84	City			FL		Zip Code	
office or remistered	ovisions of Sections 607.0 t agent, or both, in the Sta ir with, and accept the obli	te of Florida. Suc	ch change was authorize	d by :	the corporation	oration n's bo	submits this statement for the ard of directors. I hereby accept	purpose of control the appoint	hangin tment a	ng its registered as registered	
SIGNATURE			(NOTE: Basistass	d Agen	t eignoture required	when re	(inetating)	DATE			

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE ☐ Change ☐ Addition 1.1 TITLE TITLE GAGLIARDO, JOSEPH 1.2 NAME NAME 10901-D ROOSEVELT BLVD #800 1.3 STREET ADDRESS STREET ADDRESS ST. PETERSBURG FL 33716 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 2.1 TITLE TITLE GAGLIARDO, DOROTHY 22 NAME NAME 10901-D ROOSEVELT BLVD #800 2.3 STREET ADDRESS STREET ADDRESS ST. PETERSBURG FL 33716 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE 3.1 TITLE TITLE PHYLLIS A GAGLIARDO 3.2 NAME NAME 10901-D ROOSEVELT BLVD #800 3.3 STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 33716 3.4. CITY-ST-ZIP CITY-ST-ZIP □ DELETE 4.1 TITLE TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 61 TIDE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)