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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

P96000057184 (9) DOCUMENT #

GALAXY GRILLE, INC.

officer or director of the conforation or the receiver Block 12 or Block 13 if affined, or on an attaching

FILED Feb 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						- 1 (63);63) (18 18;14 81)(14 94)(1 84		***************************************	711 4 141 1441	
505 S. FLAGUE	S COHEN, MOORE, CALER, DONTEN ER DRIVE, SUITE 900 EACH FL 33401	C/O MR. LOUIS COMEN. MOORE. CALER. DONTEN 505 S. FLAGLER DRIVE. SUITE 900 WEST PALM BEACH FL 33401			DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qualifi 07/08/1996	ed			
2, Principal Pla	ce of Business	2a. Mailing Address 26			4. FEI Number 65-0677514		├ ─-†	iplied For ot Applicable		
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re			
City & State		City & State			6. Election Campaign Financin Trust Fund Contribution	g	\$5.00 Added t	,		
Zip Country 25		Zip Countr 29 30				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						10. Name and Address of Nev	/ Registered	Agent		-
	DAN, LAURIE L			81	Name					
	S FLAGLER DRIVE TE 310 EAST			82	Street Addre	ss (P.O. Box Number is Not Acce	ptable)			
WES	ST PALM BEACH FL 33401			83						
			•	84	City		FI	85 Zip (Code	1
office or re	the provisions of Sections 607.0502 in gistered agent, or both, in the State of I familiar with, and accept the obligation	Horida Such change was	authorized	1 by	the corporation	oration submits this statement for to on's board of directors, I hereby a	he purpose ccept the ap	of changing it pointment as	s registered registered	
SIGNATURE 5	Ignature, typed or profed name of registered ages to	and bio d'applicable (NO	IE Birgistored	Agei	nt signature require	d whon reinslating)	TIATI			
12.	OFFICERS AND I	DIRECTORS	13.			ADDITIONS/CHANGES TO O	FFICERS AN	ID DIRECTOR] <u>`</u>
TITLE	D DELETE		1110	1 1 TITLE				☐ Change	☐ Addition	15
NAME	CIMINELLA, MAURIZIO		1.2 NA	ME						1
STREET ADDRESS	121 BUNKER RANCCH ROAD	1.3 S ¹		.3 STREET ADDRESS						إيا
CITY-ST-ZIP	WEST PALM BEACH FL 33405		1.4 CITY - S		r-7IP					ۆ _ ئۆ _
TITLE	D D	☐ DELET e		21 TITLE				Change	Addition	١
NAME	GITTIS, HOWARD	000	22 NAME							
STREET ADDRESS	505 S FLAGLER DRIVE, SUITE				ADDRESS					
CITY-ST-ZIP	WEST PALM BEACH FL 33401	Delete	2 4 CO 31 Hi		T-7IP			Change	Addition	+
TITLE	D DELETE							L_1 Change	L_J Addition	
NAME	200 VIA BELLARIA			ME	ADDRESS.					
STREET ADDRESS	PALM BEACH FL 33480				ADDRESS					
CITY-ST-ZIP TITLE	DELETE			3.4. C(1Y - S1 - Z(P) 4.1 T(1LE)				Change	Addition	┨
NAME	MANFRA, GLEN			4 2 NAME						
STREET ADDRESS	115 DUNES EDGE ROAD				ADDRESS					
CITY-ST-ZIP	JUPITER FL 33477		4.4 CH	Y-SI	1 - ZIP					
TITLE		DELETE	5 1 TIT					Change	Addition	1
NAME			5.2 NA	ME						
STREET ADDRESS			5 3 STI	REE1 :	ADDRESS					
CITY-ST-ZIP			5.4 CFI	Y - \$1	r- 71P					
TITLE		DELETE	6.1 717					☐ Change	Addition	1
NAME			6.2 NA	MÉ						
STREET ADDRESS			63SII	REEL	ADDRESS					
CITY-ST-ZIP			6.4 CIT							
	rtify that the information supplied with	this filing does not quality f	or the exe	nipt	ion stated in S	Section 119.07(3)(i), Florida Statut	es. I further o	certify that the	information	

id that my signature shall have the same legal effect as it made under oath; that I am a this report as required by Chapter 607, Florida Statutes; and that my name appears in