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Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90121 023 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000060304

1. Corporation Name
BARMART BRITISH PUBS USA INC.

REJECTED JAN 06 1999

Principal Place of Business

COACH HORSES BRITISH PUB
6152 14TH ST W
BRADENTON FL 34207
US

Mailing Address

[REDACTED]
CANCELLED AUG 31 1998

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 COACH + HORSE
Suite, Apt. #, etc.

27 6152 14th ST W
City & State

28 Zip

34207

Country

3. Date Incorporated or Qualified

07/17/1996

4. FEI Number

36-4095138

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 the current year intangible
Personal Property Tax.

☐

Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

BRADENTON

FL

85 Zip Code

34202

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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

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

NAME VANDERVELL, MARTIN C
STREET ADDRESS 6860 GULF BLVD., SUITE 900
CITY-ST-ZIP ST. PETERSBURG FL

TITLE DVP ☐ DELETE

NAME DARE, BARRY K
STREET ADDRESS 6860 GULF BLVD., SUITE 900
CITY-ST-ZIP ST. PETERSBURG FL

TITLE [REDACTED] ☐ DELETE

NAME [REDACTED]
STREET ADDRESS [REDACTED]
CITY-ST-ZIP ST. PETERSBURG FL

TITLE [REDACTED] ☐ DELETE

NAME [REDACTED]
STREET ADDRESS [REDACTED]
CITY-ST-ZIP [REDACTED]

TITLE [REDACTED] ☐ DELETE

NAME [REDACTED]
STREET ADDRESS [REDACTED]
CITY-ST-ZIP [REDACTED]

TITLE [REDACTED] ☐ DELETE

NAME [REDACTED]
STREET ADDRESS [REDACTED]
CITY-ST-ZIP [REDACTED]

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0407836