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).

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000064869 (6) FROGGERS OYSTER BAR & GRILL N.W., INC.

## FILED Jul 22 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 4459 N. PINE HILLS RD. 4459 N. PINE HILLS RD. ORLANDO FL 32808 ORLANDO FL 32808 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/02/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 NOT APPLICABLE Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intengible 29 30 Personal Property Tax due June 30. \_\_\_ Yes 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KEIDAISH, PHILIP F JR SUITE 800 82 Street Address (P.O. Box Number is Not Acceptable) 505 WEKIVA SPRINGS RD. 83 LONGWOOD FL 32779 84 City Zip Code 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** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent algorature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE Ď 1.1 TITLE \_] DELETE HAKIM, GEORGE JR. NAME 1.2 NAME 4459 N. PINE HILLS RD. STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32808 CITY-ST-ZIP 1.4 CITY-ST-ZIP 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 STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE 4.1 TITLE DELETE \_\_\_ 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 6.1 TITLE DELETE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 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

CR2E034 (5/98