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

CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000065027 (0)

PINELLAS RESTAURANT SERVICES, INC.

## **FILED** May 07 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address		a idesidet sie iniid bilit anni bilit anni 68110 a	timt mittl datin eiffl idas inm
4000-FIANGE ROAD CLEARWATER FL 24005-		<del>-2000 FIANGE ROAD</del> CLEARWATER FL <del>-24025</del> -			
				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				08/05/1996	
2. Principal Pi	ace of Business	2a. Mailing Address	Sm /	4. FEI Number	Applied For
	6 60TH ST. NORTH	26 13256 6074 8	T. NORTH	59-3392555	Not Applicable
Suite, Apt 4	#, etc	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		27]			Fee Required
CLEA	KMATER FLORIDA	28 CLEARWATER	FLORIDA	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
~ Zig35760	Country A	7m 2276 - 2018	Country SA	8. This corporation owes or has paid the c	
4 27/00	9. Name and Address of Current	29 37 100-3716	30	Personal Property Tax due June 30.	Yes No
		Hedistelen Walli	81 Name	10. Name and Address of New Registered	1 Ağeni
PLA	AYFORD, G A	addaina . 17 m	1 1		
7029	1 <del>0 Ulmerton Roa</del> d % (bla) 190 Fl 3464+ <b>2665 64</b> 51	CHMARICA, MC.	82 Street	Address (P.O. Box Number is Not Acceptable)	
LAF	100 FL 34644 , 2665 2473)	BAY SKITE - VY-S	83		
	UARGO, FL	33771-2421			
			84 City	FI	85 Zip Code
44 Purquant to	o the provisions of Sections 607 01.00	Land 607 1509 Florida Statuto	e the above named		
office or re agent. I ar	ogistered agent, or both, in the State om familiar with, and accept the obliga	of Florida, Such change was a tions of, Section 607.0505, Flo	uthorized by the corp irida Statutes	corporation submits this statement for the purpose poration's board of directors. I hereby accept the approximation is a province of the purpose poration of the purpose province of the purpose of the p	pointment as registered
SIGNATURE	Signature typed or pointed harse at regetors a age:	AND	Registered Agent argnature	required when remestating) DATL	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE	Applifold of Made 10 of Floring Al	Change Addition
NAME	PLAYFORD, FRANK R		12 NAME		<b>—</b> • • • • • • • • • • • • • • • • • • •
STREET ADDRESS	1357 52 AVE NE		1.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL 33703		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		DELETE	4.1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS	,	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	<u> </u>	
TITLE		DELETE	5 1 TITLE		Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP		***	54 CITY-ST-ZIP		
TITLE		☐ DELETE	6 1 TITLE		☐ Change ☐ Addition
NAME			6 2 NAME		
STREET ADORESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I hereby condicated of	ertity that the information supplied wit	h this filing does not qualify for	r the exemption state	ed in Section 119.07(3)(i), Florida Statutes. I further of nature shall have the same logal effect as if made u	certify that the information
officer or o	director of the corporation or the receiver Plack 13 dicharded by on an attack	iver_or trustee empowered to e	execute this report as	required by Chapter 607, Florida Statutes; and that	my name appears in

SIGNATURE: AMALL LOS FRANK R. PLAYFOLD