08-19-2002 90127 001 \*\*\*\*61.25 F 196600073929 **FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)** 02 AUG 21 PM 4:11 DOCUMENT # P96000073929 SECRETARY OF STATE TALLAHASSEE, FLORIDA 1. Entity Name A.N.W. Sports Bar & Grille, Inc. 975300 DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 4669 Cortez Rd. W. 4669 Cortez Rd. W. Suite. Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Bradenton, FL City & State 4. FEI Number Applied For Not Applicable Bradenton, 65-0691647 34210 Country Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of Current Registered Agent Voss, Angela K. DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE <sup>Cliy</sup>Bradenton FL | 32298 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, upped or printed numberal registered agains and title it app January 1 - May 1 Fee is \$150.00 After May 1 Fee is \$550.00 Amended UBR is \$61.25 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be Added to Fees (See criteria on back) Trust Fund Contribution. Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS TITLE D/P/S/T (12/01) Voss, Angela K. 4850 50th Street W., #2004 NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP Bradenton, FL 34210 CITY-ST-ZIP TITLE TITLE NAME Sheffstall, Irene HAME STREET ADORESS 6969 Madonna Place STREET ADDRESS CITY-SY-ZIP Sarasota, FL 34243 City: St. DP fffle TOTE NAME NAME. STREET ADDRES DO NOT WRITE CITY-ST-ZIP TITLE mie. IN THIS SPACE valie in STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-2P TITLE ME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-70 TITLE mie, NAME - -

STREET ADDRESS

COLY ST. ZP 13. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

K. Vand Angela K. Voss, President 8-15-07-941 761-0833

STREET ADDRESS

SIGNATURE: \_

CITY-ST-ZIP