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May 13 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000081673 (1)**

1. Corporation Name
HOPS GRILL & BAR, INC.

Principal Place of Business	Mailing Address
3030 N. ROCKY POINT DR. WEST SUITE 650 TAMPA FL 33607	3030 N. ROCKY POINT DR. WEST SUITE 650 TAMPA FL 33607-5906

3. Date Incorporated or Qualified: 10/01/1996
3a. Date of Last Report:

2. Principal Place of Business (21): Suite, Apt. #, etc. (22): City & State (23): Zip (24): Country (25)

2a. Mailing Address (26): Suite, Apt. #, etc. (27): City & State (28): Zip (29): Country (30)

4. FEI Number: 58-2292652 ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

FOWLER, WHITE, GILLEN, BOGGS, VILLAREAL & BANKER, P.A. (ATTN. ALAN HIGBEE, ESQ.)
501 E. KENNEDY BLVD., SUITE 1700
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. 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 _____ DATE
Signature, typed or printed name of registered Agent and title if applicable (NOTE: Registered Agent Signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	☐ DELETE	1.1 TITLE	DP	☐ Change ☒ Addition
NAME	MASON, DAVID L.		1.2 NAME	MASON, DAVID L.	
STREET ADDRESS	3055 TURTLE BROOKE		1.3 STREET ADDRESS	3055 TURTLE BROOKE	
CITY-ST-ZIP	CLEARWATER, FL 34621		1.4 CITY-ST-ZIP	CLEARWATER, FL 34621	
TITLE	DV	☐ DELETE	2.1 TITLE	DV	☐ Change ☒ Addition
NAME	SCHELLDORF, THOMAS A.		2.2 NAME	SCHELLDORF, THOMAS A.	
STREET ADDRESS	170 GREENHAVEN CIRCLE		2.3 STREET ADDRESS	170 GREENHAVEN CIRCLE	
CITY-ST-ZIP	OLDSMAR, FL 34667		2.4 CITY-ST-ZIP	OLDSMAR, FL 34667	
TITLE		☐ DELETE	3.1 TITLE	VTSD	☐ Change ☒ Addition
NAME			3.2 NAME	Terence M. Terenzi	
STREET ADDRESS			3.3 STREET ADDRESS	3030 N. Rocky Point Dr. West, Suite 650	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	Tampa, FL 33607	
TITLE		☐ DELETE	4.1 TITLE	D	☐ Change ☒ Addition
NAME			4.2 NAME	Tom E. Dupree, Jr.	
STREET ADDRESS			4.3 STREET ADDRESS	3030 N. Rocky Point Dr. West, Suite 650	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	Tampa, FL 33607	
TITLE		☐ DELETE	5.1 TITLE	D	☐ Change ☒ Addition
NAME			5.2 NAME	Kirk Kinsell	
STREET ADDRESS			5.3 STREET ADDRESS	3030 N. Rocky Point Dr. West, Suite 650	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	Tampa, FL 33607	
TITLE		☐ DELETE	6.1 TITLE	D	☐ Change ☒ Addition
NAME			6.2 NAME	Erich J. Booth	
STREET ADDRESS			6.3 STREET ADDRESS	3030 N. Rocky Point Dr. West, Suite 650	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	Tampa, FL 33607	

CR2E034 (9/96)

14. I do 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.

SIGNATURE: [signature] 4/30/97 X 813-282-9350