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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATI

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000084331 (3)

RADICALS NIGHT CLUB, INC.

Principal Place of Business	Mailing Address
2555 SOUTH ATLANTIC AVENUE, SUITE 1203	POST OFFICE BOX 249

FILED May 16 1997 8:00am Secretary of State



2555 BOUTH A DAYTONA BEAR	TLANTIC AVENUE, SUITE 1203 CH FL 32118	POST OFFICE BOX 249 FRUITLAND PARK FL 34731-	0249			
				3. Date Incorporated or Qualified 10/11/1996	3a. Date of Last R	eport
2. Principal Pi	ace of Busines	2a. Mailing Address		4. FEI Number	Ar.	plied For
21843	lee ka	26 843 Lee	RO	59-3464 4]] +	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	····	5. Certificate of Status Desired	\$8.75 / Fee Re	
City C State	indo PL.	City & State Co F	٠.	Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	
24 3281			Country 10 USA		Yes No	. 199.032,
	9, Name and Address of Curren	t Registered Agent		10. Name and Address of New Re	gistered Agent	
	RILAWYER CHARTERED		81 Name	riel Caurence	Davis	1
	ALMERIA AVENUE		82 Street Ad	ldress (P.O. Box Number is Not Acceptable	000	
COR	AL GABLES FL 33134		25	55 S. Atlantic A	ve.	
			83 6.3	e 1203		
	^		84 City		85 Zip (Codo
	N 1/		Day	itora Beach Shores	FL ຶ່ 3່ຽ	-168
11. Pursuant t	to the provisions of Sections 607 030:	2 and 607.1508, Florida Statutes	, the above-riamed c	orporation submits this statement for the p	urpose of changing it	s registered
agent. I a	m familiar with, and accept the online	ations of, Section 607.0545, Flori	ida Statutes.	oration's board of directors. I hereby accep	it the appointment as	registered
SIGNATURE	ハーソス・ハ	president	Daniel	C, Davis		
		of and fille if applicable. (NOTE	Hegistoren Agerit signature re		DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC		(
TITLE	PO DANIEL I	DELFTE	1.1 TO LE	Pere	L Change	☐ Addition
NAME	DAVIS, DANIEL L	HE CHITE 1000	1.2 NAME	•		\;
STREET ADDRESS	2555 SOUTH ATLANTIC AVENU	UE, SUITE 1203	13 STREET ADDRESS			Įį.
CITY-ST-ZIP	DAYTONA BEACH FL 32118		1.4 CITY - ST - ZIP			
TITLE	STD BILLIAND A	☐ DELETE	21 FITLE		[] Change	Addition
NAME	BLUNENFELD, RICHARD A	LIE ALUTE 4006	2.2 NAME			1
STREET ADDRESS	2555 SOUTH ATLANTIC AVENU	UE, SUITE 1203	2.3 STREET ADDRESS			
CITY-ST-ZIP	DAYTONA BEACH FL 32118		2 4 CITY- ST-7IP	······································		
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NAME			3 2 NAMI			1
STREET ADDRESS			3 3 \$1REET ADDRESS			
CITY-ST-ZIP	<u></u>		3.4. C 1Y - \$1 - Z P			
TALE		☐ DELETE	4.1 Title		Change	Addition
NAME			4.2 NAME			.
STREET ADDRESS			4.3 \$TREET ADDRESS			,
CITY-ST-ZIP			4.4 ÇITY- ST-7IP			
TITLÉ		L DELETE	51 THUE		L Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 \$1REET ADDRESS			
CITY-ST-ZIP			5.4 CITY - S1 - ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		6.4 QHY- S1 - ZIP			I
14. I do heret	by certify that the information supplied	d with this fing does not qualify	for the exemption sta	ted in Section 119.07(3)(i), Florida Statutes	s. I further certify that	the

I do needy certify that the information supplied with this hind does not qualify for the exemption stated in Society 19.07(3)(i), Florida Statutes. I further certify that the information indicated on this adjulating population in the information indicated on this adjulating the same legal effect as if made under eath; that I am an officer or director of thulcorporation 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 in an attachment with an address.

CICNATURE.

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