Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90096 025 \*\*\*150.00

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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Kathe ine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000087475

1. Corporation Name

BALLYH	OO GRILL INTERNATIONAL	, INC.				
Principal P ace of Business Mailing Address						
% JUSTIN (I. JOSEPH % JUSTIN G. JOSE 1266 S. PINELLAS AVENUE 1266 S. PINELLAS TARPON SPRINGS FL 34689 TARPON SPRINGS			/ENUE			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed
<del>: : .a</del>		The Advisor Address	O Maritima Addresses			10/23/1996 4. FEI Number Applied For
<del></del> 7	lace of Business	2a. Mailing Address				59-3414236   Not Applicable
Suite, Act.	# ata	Suite, Apt. #, etc.				\$8.75 Auditional
22	#, etc.	27	<u> </u>			5. Certificate of Status Desired Fee Recuired
City & Stat	e	City & State				6. Election Campaign Financing \$5.00 May Be
23	-	28				Trust Fund Contribution Added to Fees
Zip			Count	Country		8. This corporation owes the current year intangible
24	25	29	30	30		Persor al Property Tax. ☐ Yes ☐ No
	9. Name and Address of Currer	it Registered Agent		_,		10. Name and Address of New Registered Agent
100	2011 HATEL O		8	B1	Name	
Joseph, Justin G 12 <b>6</b> 6 S. Pinellas avenue			8	82 Street Ac		Acdress (P.O. Box Number is Not Acceptable)
TAR	PON SPRINGS FL 34689		8	83		
			-	B4	City	85 Zip Code
				54	City	FL   S   Zip o'Ne
office crr	to the provisions of $S\epsilon$ ctions 607.050 egistered agent, or bo h, in the State m familiar with, and accept the obliga	of Florida. Such change was	authorized t	by t	the corpo	corporation submits this statement for the purpose of changing its registered or tion's board of cirectors. I hereby accept the appointment as registered
SIGNATUFE	Signature, typed or printed na ne of registered age	A conditional description (NOT	T - Poisietered A	ani	-ianoture re	equired when reinstating) DATE
12,		AL) DIRECTORS	13.	yen.	l Signature 15	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PS	DELETE	1.1 T/T/L			Change Addition
NAME.	FRAGALE, JOHN C		1.2 NAM	1.2 NAME		
STREET ADDRESS	% 1266 S. PINELLAS AVENUE		1,3 STRI	EET.	ADDRESS	
CITY-ST-ZIP	TARPON SPRINGS FL 34689		1.4 CITY-ST-ZIP		- 1	
TITLE	VT	☐ DELETE		2.1 TITLE		☐ Change ☐ Addition
NAME	MOELLER, RICHARD M		2 2 NAM	Æ		
STREET ADDRESS	% 1266 S. PINELLAS AVENUE		2.3 STREET ADDRESS		ADDRESS	
CITY-ST-ZIP	TARPON SPRINGS FL 34689		2. 4 CITY-\$1		T-ZIP	
TITLE		☐ DELETE		31 TITLE		☐ Change ☐ Addition
NAME			3.2 NAM	Æ		
STREET ADDRESS			3.3 STR	EET	ADDRESS	
CITY-ST-ZIP			34, CITY-S		T-ZIP	
TITLE		DELETE	41 TITU	4 1 TITLE		Change Addition
NAME			4.2 NAME		1	
STREET ADDRESS			4.3 STREE		ADDRESS	
CITY-ST-ZIP			4.4 CITY-S		r-ZIP	
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAM	Æ		
STREET ADDRESS			5.3 STR	EET.	ADDRESS	
CITY-ST-ZIP			54 CITY		r-ZIP	
TITLE		☐ DELETE				☐ Change ☐ Addition
NAME			6.2 NAM	Æ	- 1	

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 a secure 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, with a lighter than 14 my name appears in Block 12 or Block 13 if changed or on an attachment with an address, with a lighter than 15 miles and 15 miles and 15 miles and 16 mil

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

YPED OR FRINTED AME OF SIGNING OFFICER OR DIRECTOR