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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris,

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9600093828

ROY'S IRISH PATTY INC.

FILED May 04, 1999 8:00 am Secretary of State

05-04-1999 90043 049 ***150.00



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Principal Place of Business Mailing Address						- [1881] 88) (18 1811 8111 8811 8811 8811 8811	a incon unaciami	11001 1011 1001
1161 GLENMOOR COURT CLEARWATER FL 34624		1161 GLENMOOR COURT CLEARWATER FL 34624						
						DO NOT WRITE IN THIS SPACE		
						3. Date incorporated or Qualifed 11/15/1996		
2. Principal P	2a. Mailing Address	iling Address			4. FEI Number	Δr	plied For	
— ·		26	¬ · ·			59-34 19499		ot Applicable
Suite, Apt.	# etc		Suite, Apt. #, etc.			. :	\$8.75	
22	#, GO.	27	······································			5. Certificate of Status Desired	Fee Re	1
City & State		City & State	⊢ , ′			6. Election Campaign Financing	\$5.00	
23		28				Trust Fund Contribution Added to Fees		
Zip ·	Country 25	Zip 29				8. This corporation owes the current year Intangible Personal Property Tax. Yes No		
,	9. Name and Address of Curren		10. Name and Address of New Registered Agent					
					Name			
DIAMOND, ROY				82	Street Addre	ress (P.O. Box Number is Not Acceptable)		
1161 GLENMOOR COURT				32 Short add 555 (1.5. 257 tal)				
CLEA	ARWATER FL 34624			83		•		
	•			84	City	F	85 Zip	Code
, , , , , , , , , , , , , , , , , , ,						· ·		registered
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
12.	OFFICERS AND DIRECTORS		13.	, Agom .	arginatoro regamen	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTO	DRS IN 12
TITLE	P	☐ DELETE 1.1 TI		TLE			Change	☐ Addition
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NAME		_ == -	6.2 N	AME			-	
STREET ADDRESS	•	•			ADDRESS			ļ
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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 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, with all other like empowered.

SIGNATURE:

4-2-6-99