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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P97000004095 (0)

KEY WEST GARDEN CAFE, INC.

## **FILED** Mar 25 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address				
310 DUVAL S KEY WEST FI		310 DUVAL STREET KEY WEST FL 33040				DO NOT WRITE IN THIS SPACE
			,			3. Date Incorporated or Qualified
9 Principal Pl	lace of Business	2a. Mailing Address				01/09/1997 4. FEI Number   Applied For
21 Principal F1	lace of Dushiless	26. Walling address	26 525 Oval Street			4. FEI Number G5 - 0723373   Applied For Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			S8 75 Additional
22		<u> </u>	27			Certificate of Status Desired     Fee Required
City & State		City & State	City & State			6. Election Campaign Financing \$5.00 May Be
Zip	Country	28 Key Wee		untry	<u>.</u>	Trust Fund Contribution
24	25	<u>∞ 33040</u>		ົ່ວ.່ຽ.	A .	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
		s of Current Registered Agent	1001 -	<u>V.</u>		10. Name and Address of New Registered Agent
FΔ	RRELLY, GREGORY		,	81 N	ame	
	WHITEHEAD STREET	Т		82 St	oot Addy	ress (P.O. Box Number is Not Acceptable)
	Y WEST FL 33040	•			eet Auui	less (r. O. Dox Number is Not Acceptable)
				В3		
				<b>84</b> . Ci	y	FL 85 Zip Code
11. Pursuant t	to the provisions of Section	ons 607.0502 and 607.1508, Florida Stat	utes, the a	bove-na	ned corp	poration submits this statement for the purpose of changing its registered
office or re agent. I ar	<b>egis</b> tered agent, or both, m <b>fa</b> miliar with, and accep	in the State of Florida. Such chan <b>ge w</b> as pt the obligations of, Section 607.0505, I	s authorize Florida Stal	d by the tutes.	corporati	tion's board of directors. I hereby accept the appointment as registered
SIGNATURE		·				,
				d Agent sig	nature require	red when reinstating) DATE
12.	PSTD	FICERS AND DIRECTORS  DELETE	13.	T1 E	<del>-                                    </del>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	SELLACK, RONNEY	<del>-</del>		1.1 TITLE 1.2 NAME		- Contained - Recontor
STREET ADDRESS	310 DUVAL ST.		<b>I</b>	1.3 STREET ADDRESS		
CHTY-ST-ZIP	KEY WEST FL 3304	40	- 1	TY-ST-ZIP	133	
TITLE	1127 11201 12 000	DELETE	2.1 TI			Change Addition
NAME			2.2 N	AME		
STREET ADDRESS			2.3 STREE		ESS	
CITY-ST-ZIP			2.4 CITY-ST-ZIP		.   _	
TITLE		DELETE	DELETE 3.1 TITE			☐ Change ☐ Addition
NAME			3.2 N	AME	1	
STREET ADDRESS			3.3 \$1	REET ADDR	ESS	
CITY - ST - ZIP				ITY-ST-ZIF		
TILE		☐ DELETE	4.1 TI			Change Addition
NAME			4.2 N			
STREET ADDRESS			,	REET ADDR	ESS	
CITY-ST-ZIP TITLE		DELETÉ	. 4.4 CI 5.1 TI	TY-ST-ZIP	<del> </del>	☐ Change ☐ Addition
NAME		- Dittil	5.2 N/		- (	_ orange _ Auditor
STREET ADDRESS				ireet addr	F66	
CITY-ST-ZIP			- 1	TY-ST-ZIP	LV0	
TITLE		☐ DELETE	5.4 CI		<del></del>	☐ Change ☐ Addition
NAME			6.2 N/			_ •
STREET ADDRESS				REET ADDR	ESS	
CITY-ST-ZIP			1	TY-\$1-21P		
	ertify that the information	supplied with this filling does not qualify			tated in	Section 119 07(3\frac{1}{1}) Florida Statutes I further certify that the information

receive certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statules. If further certify that the informatio indicated on this annual report or suppliemental 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 empowaged to execute this report as required by Chapter 607, Florida Statules; and that my name appears in Block 12 or Block 13 if changed, or on an additionary program to the corporation of th