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 # P97000027304

1. Corporation Name

DJ'S GRILL, INC.

May 06, 1999 8:00 am Secretary of State

05-06-1999 90011 037 ***150.00



	, ž			
Principal Plac	ce of Business	Mailing Address		יספי יפנס זונסט ינווי סספסן וופות פזומה זונסט וונסט וונט וונ
6550-102ND AVE 6550-102ND AVE				
PINELLAS PARK FL 33782 PINELLAS PARK FL 33782				DO NOT IMPLIE IN THE CRACE
US US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed
	.			03/21/1997
2 Principal F	Place of Business	2a. Mailing Address		4. FEI Number Applied For
2. Principal Place of Business 2a. Mailing Address 25				59-2433280 59-3433280 Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.		\$8.75 Additional
22 27			5. Certificate of Status Desired Fee Required	
City & State City & State				6. Election Campaign Financing \$5.00 May Be
23	. ,	28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
24	25	29	30	Personal Property Tax. Yes No
1	9, Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Registered Agent
			81 Name	
	ng, William D		82 Street Add	dress (P.O. Box Number is Not Acceptable)
6550-102ND AVE			Sileet Aut	diess (F.O. Box Mullibel is Not Acceptable)
PINE	ELLAS PARK FL 33782		83	
ĺ	•		84 City	FI 85 Zip Code
SIGNATURE	Signature, typed or printed name of registered		Registered Agent signature requi	**************************************
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition
TITLE	PD	☐ DELETE	1.1 TITLE	Change — Magnan
NAME	GOING, WILLIAM D		1.2 NAME	
STREET ADDRESS			1.3 STREET ADDRESS	
CITY-ST-ZIP	PINELLAS PARK FL 33782		1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		☐ OELETE	2.1 TITLE	☐ Change ☐ Addition
NAME			2.2 NAME	
STREET ADDRESS	3		2.3 STREET ADDRESS	
CITY-ST-ZIP		Cheuere	2. 4 CITY-ST-ZIP	Change
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	•-
STREET ADDRESS	5		3.3 STREET ADDRESS	
CITY-ST-ZIP		C pereze	3.4. CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS	s¦		4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	Change C Addition
TITLE		☐ DELETE	5.1 ΠΤLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS	S		5.3 STREET ADDRESS	
Crty-ST-ZIP	 		5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	1		6.2 NAME	
TOTAL			6.3 STOFFT ADDRESS	

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.

64 CITY-ST-ZIP

SIGNATURE: