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PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000035200 (9)

SANDPIPER RESTAURANT, INC.

FILED May 11 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 5685 36TH AVE., N. 5685 36TH AVE., N. ST. PETERSBURG FL 33701 ST. PETERSBURG FL 33701 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/18/1997 2. Principal Place of Business 2a. Mailing Address Applied For **2**950 59-3440728 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees Country 8. This corporation owes or has paid the current year Intangible 25 Pinellas 29 Personal Property Tax due June 30. Yes Yes 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ROBERTS, CALVIN C 6574 80TH AVE. N. 82 Street Address (P.O. Box Number is Not Acceptable) ST. PETERSBURG FL 32301 83 84 City Zip Code Pursuant to the provisions of Sections 607 (1502 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, typed or profited name of regeleted agent and five it applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Present Livingston 5085 36AUE. N DELETE Addition TITLE 1.1 TITLE Change NAME 1.2 NAME 1.3 STREET ADDRESS STREET ADDRESS ST. PETERSburg, FL. 33710 vice president 14 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE Change MAXINE SAUFR 6036 106 ALE.N. NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS Penallis Back, FL. CITY-ST-ZIP 2. 4 CITY - ST - ZIP SCORFIARY MARY LIVINGSTON DELETE Change Addition TITLE 3.1 7171.6 NAME 3.2 NAME 5685 36 AUE. N. STREET ADDRESS 3.3 STREET ADDRESS ST. PETERSburg, FL. 3 4. CITY-ST-ZIP DELETE TRURSURGA Change TITI F 4 1 TITLE Addition Boyd AMES 6036 106 AVE. N NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 33782 Pinallis PARK, FL CITY-ST-ZIP 4.4 CRY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 61 1ft F NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - S1 - ZIP

14. Thereby 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.

SIGNATURE: July July Store 4-30-98 813-321-2318