## 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 # P97000090847 (9)

DANCING BEAR FOOD & BEVERAGE, INC.

**FILED** Mar 09 1998 8:00am Secretary of State



Principal Place of Business Mailing Addross											
110 SE 6 STREET 15 FLOOR FT LAUDERDALE FL 33301				110 SE 6 STREET 15 FLOOR FT LAUDERDALE FL 33301							DO NOT WRITE IN THIS SPACE
											Date Incorporated or Qualified     10/22/1997
2. Principal P	lace of Busin	2a. Mailing Address							4. FEI Number Applied For		
21 333 E. Las Olas Blyd.					26 333 E. Las Olas Blvd						65-0795066 Not Applicable
Suite, Apt. #, etc.					Suite, Apt. #, etc.						5. Certificate of Status Desired S8.75 Additional Fee Required
City & State					City & State						6. Election Campaign Financing \$5.00 May Be
23 Fort Lauderdale, FL					28 Fort Lauderdale, FL						Trust Fund Contribution Added to Fees
Zip	F			ļ <sub>1</sub>	h				country		6. This corporation owes or has paid the current year Intangible
24 33301 25 USA				and the second second							Personal Property Tax due June 30. Yes k No  10. Name and Address of New Registered Agent
9, Name and Address of Current Registered Agent								81 Name			
SMITH, DENNIS D 110 SE 6 STREET 15 FLOOR											
FT LAUDERDALE FL 33301								82 Street Addre			ess (P.O. Box Number is Not Acceptable)
!	D (ODE)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					83			
								84	City		FL 85 Zip Code
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 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 provided hance of registered agent and the if agricultable (NOTE: Registered Agent signature required when reinstating).  DATE											
12.		RECTORS 13.				in signator	e required	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	Of Rectorate				DELETE			1.1 TITLE		D.V	VP,T Change Addition
NAME								NAME			ant J. Smith
STREET ADDRESS	s				1.3 \$			STREET	ADDRESS		B E. Las Olas Blvd.
CITY-ST-ZIP	I	1.4			CITY-S	T-ZIP		rt Lauderdale, FL 33301			
TITLE					DELETE			TITLE			VP,S Change X Addition
NAME	•		2.2			i I		El1	iza Egan Smith		
STREET ADDRESS			2.3						B E. Las Olas Blvd.		
CITY-ST-ZIP	j									For	rt Lauderdale, FL 33301
TITLE								3.1 TITLE		İ	Change Addition
NAME								NAME			
STREET ADDRESS								ADDRESS			
CITY-ST-ZIP TITLE	34.0 DELETE 4.17							CITY-S	ST - ZIP	<del> </del>	Change Addition
NAME								4. 2 NAME			C Change C Accept
STREET ADDRESS									ADDRESS		
CITY-ST-ZIP	1						4.3 STREET ADDRESS 4.4 CITY-ST-ZIP				,
TITLE			•· · · · · · · · · · · · · ·					TITLE	1-211	†·	Change Addition
NAME						5.2 N					
STREET ADDRESS							5.3 STR				
CITY-ST-ZIP									T-ZIP		İ
TITLE						DELFFE 61T				Ţ	Change Addition
NAME							62	NAME			
STREET ADDRESS							6.3	STAEET	ADDRESS	ì	
CITY-ST-ZIP				6.4 CITY-ST							
	erlify that th	a information	sombled wat	this fi	lina daes	not qualify f				ed in S	Section 119 07(3)(i) Florida Statutes I further certify that the information

Interest certify that the information supplied with this tiling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is reported annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation days received that the 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 an attachment with providences.

SIGNATURE:

Grant J. Smith