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DO NOT WRITE IN THIS SPACE

PROFIT CORPORATION
ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000096451

1. Corporation Name

SWEET DREAMS SING & DANCE HALL, INC.

Principal Place of Business
12810 FRONT BEACH RD
PANAMA CITY BEACH FL 32413

Mailing Address
12810 FRONT BEACH RD
PANAMA CITY BEACH FL 32413

2. Principal Place of Business

2a. Mailing Address

21 12810 Front Beach Rd

26 12810 Front Beach Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

23 City & State

Panama City Beach, FL

27 City & State

Panama City Beach, FL

24 Zip

25 Country

29 Zip

30 Country

32407 USA

32407 USA

9. Name and Address of Current Registered Agent

MOORE, JAMES
218 S WELLS ST
PANAMA CITY BEACH FL 32413

3. Date Incorporated or Qualified

11/12/1997

4. FEI Number

59-3476940

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax.

Yes No

10. Name and Address of New Registered Agent

81 Name

Ernest C Lee, SR

82 Street Address (P.O. Box Number is Not Acceptable)

226 Lakeview Circle

83

84 City

Panama City Beach FL

85 Zip Code

32413

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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

TITLE PS
NAME LEE, ERNEST C
STREET ADDRESS 218 S. WELLS ST.
CITY-ST-ZIP PANAMA CITY BEACH FL 32413

TITLE VPT
NAME LEE, PAULA A
STREET ADDRESS 218 S. WELLS ST.
CITY-ST-ZIP PANAMA CITY BEACH FL 32413

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PS
1.2 NAME Lee, Jr. Ernest C.
1.3 STREET ADDRESS 614 Laurel St.
1.4 CITY-ST-ZIP Panama City Beach, FL 32407

2.1 TITLE VPB
2.2 NAME Lee, Paula A.
2.3 STREET ADDRESS 614 Laurel St.
2.4 CITY-ST-ZIP Panama City Beach, FL 32407

3.1 TITLE S/T
3.2 NAME Lee, James Kevin
3.3 STREET ADDRESS 226 Lakeview Circle
3.4 CITY-ST-ZIP Panama City Beach, FL 32413

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-10-99 (850) 230-6003