## **PROFIT** CORPORATION ANNUAL REPORT 1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Mar 24, 1999 8:00 am Secretary of State 03-24-1999 90072 029 \*\*\*150.00

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<b>DOCUMENT</b>	#	P98000002702

RESTAU	RANT VIENNA WALTZ, INC.					1 (88)/181/18 (18/18/18/18/18/18/18/18/18/18/18/18/18/1	11 <b>61</b> 50 <b>45</b> 11 1		
Principal Place	of Business	Mailing Address							
302 LEE BLVD		302 LEE BLVD			- 1				
STE 102		STE 102			L	DO NOT-WRI	re in THIS	SPACE	استعمين
LEHIGH ACRES	FL 33936	LEHIGH ACRES FL. 33936				3. Date incorporated or Qualifed			7
		"To Concepcio	mA	Boros		01/09/1998			.
	(5)	_2aMailing Address				4. FEI Number		Api	stled For
	lace of Business	25 25 Homester	art K	2d 11.	Sk	ite 11		No	Applicable
Sulte, Apt.	# 440	Suite, Apt. #_etc			, 00	<del></del>		\$8.75 A	dditional
22	F, GW.	In Lehigh Acre	<b>か</b> , た	~~>	"	5. Certificate of Status Desired		Fee Ro	quired
City & State	6	City & State			-e	6. Election Campaign Financing		\$5.00	-,
23		28				Trust Fund Contribution		Added to	Fees
Zip	Country	Zp2.27/76	Count	75-1	7) (	8. This corporation owes the curr	ent year int	angible	
24	25	1231 10 13	30 -	13.1	. /	Personal Property Tax.	la mine d		□No .
	9. Name and Address of Curren	t Registered Agent	_	14 N	1(	0. Name and Address of New f	refistered	Agent	<del></del>
			*	Name					
	rgan, John M Lee Blvd		8	32 Street A	Address	(P.O. Box Number is Not Accepta	ble)	_	1
			-	33					
STE	IGH ACRES FL 33936		l°	23					
LEN	IGH ACRES PL 55950		18	34 City			FL	85 Zip C	code
			1 - 1			and the state of the	numose of	changing its:	registered:
-:11.:Pursuant	to the provisions of Sections:607:050	2:and:607:1508:Flonda:Statifies	2-018 MAC	340-11511160°F	an banan	(Cit ): Off for 1 for the world - Jacob Cit 1 and 1 for the world	4 400 0000	ntment as rec	interest
	arietaran anant of boin in the Sulle i	of Florida, Such change was avi	rthorized b	by the corpor	ration's l	board of directors. I hereby accept	n min athbou		ISTERIOU
office or r agent. I a	registered agent, or both, in the state of the obligation familiar with; and accept the obligation	of Florida, Such change was au tions of, Section 607.0505, Flori	ithorized b Ida Statuti	by the corpor es.	ration's I	on:submits this statement for the board of directors. I hereby accep	y nie stylvi		pstered
	•						DATE	•	
SIGNATURE	Signature, typed or printed name of regutared agen	n and the d applicable. (NOTE: F		by the corpores.		n reinstating)	DATE		
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SIGNATURE 12. TILE	Signature, typed or printed name of regulatered agent OFFICERS AN	n and blie if applicable. (NOTE: F D DIRECTORS	Registered Ac	gent signature rec		n reinstating)	DATE	ID DIRECTO	
SIGNATURE  12.  TITLE  NAME	Signature, typed or printed name of regulatived agent OFFICERS AN D RIGLER, VOJKA	n and blie if applicable. (NOTE: F D DIRECTORS	Registered Ac 13. 1.5 TITLE 1.2 NAM	gent signature rec		n reinstating)	DATE	ID DIRECTO	
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