


FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90008 030 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000002818

1. Corporation Name
BONGO'S II INC.

Principal Place of Business
 4132 41 CIRCLE SOUTH
 ST PETERSBURG FL 33711

Mailing Address
 4132 41 CIRCLE SOUTH
 ST PETERSBURG FL 33711

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/12/1998

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

28 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

29 Zip

Country

4. FEI Number

59-3490036

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ACCOUNTING & TAX HELP, INC.
8668 PARK BLVD SUITE A
SEMINOLE FL 33777

81 Name

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

4132 41st Cir. S.

83

84 City

ST. PETE

FL

85 Zip Code

33711

11. 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 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

Mark A. Graham

(NOTE: Registered Agent signature required when reappointing)

DATE

4-27-99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	President	<input type="checkbox"/> DELETE
NAME	Mark A. Graham	
STREET ADDRESS	4132 41st Cir. S.	
CITY-ST-ZIP	St Pete, FL. 33711	
TITLE	Vice President	<input type="checkbox"/> DELETE
NAME	Nicole Graham	
STREET ADDRESS	4132 41st Cir. S.	
CITY-ST-ZIP	St Pete, FL. 33711	
TITLE	Craig Malagrides	<input type="checkbox"/> DELETE
NAME	Vice President	
STREET ADDRESS	1209 Pass A Grill Way	
CITY-ST-ZIP	St Pete Bch, FL. 33701	
TITLE	Vice President	<input type="checkbox"/> DELETE
NAME	Gayle Malagrides	
STREET ADDRESS	1209 Pass A Grill Way	
CITY-ST-ZIP	St Pete, Bch, FL. 33701	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:

Mark A. Graham
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-99

Date

727-865-6065

Daytime Phone #

CR2E034 (1/98)