

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

FILED  
Mar 31, 1999 8:00 am  
Secretary of State

03-31-1999 90049 016 \*\*\*150.00

DOCUMENT # P98000011973

1. Corporation Name  
RESORT CAFE, INC.



Principal Place of Business  
2001 SOUTH SURF ROAD  
UNIT 7-C  
HOLLYWOOD FL 33019

Mailing Address  
2001 SOUTH SURF ROAD  
UNIT 7-C  
HOLLYWOOD FL 33019

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/06/1998

2. Principal Place of Business

21 Resort CAFE INC

2a. Mailing Address

26

Suite, Apt. #, etc.

22 101 N OCEAN DR

Suite, Apt. #, etc.

27

City & State

23 HOLLYWOOD FL

City & State

28

Zip

24 33014

Country

25 Broward

Zip

29

Country

30

4. FEI Number

65-0810379

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$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

AMERILAWYER  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name JUDY SCOTT

82 Street Address (P.O. Box Number is Not Acceptable)  
2001 S. SURF RD 7-C

83 HOLLYWOOD FL 33019

84 City

FL

85 Zip Code  
33014

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

JUDY SCOTT Pres

(NOTE: Registered Agent signature required when re-registering)

DATE

2-22-99

12. OFFICERS AND DIRECTORS

TITLE PTD  
NAME SCOTT, JUDY  
STREET ADDRESS 2001 SOUTH SURF ROAD  
CITY-ST-ZIP HOLLYWOOD FL 33019

TITLE SVD  
NAME FEIGENBAUM, TONI  
STREET ADDRESS 2001 SOUTH SURF ROAD  
CITY-ST-ZIP HOLLYWOOD FL 33019

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  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

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 #

3-24-99 954 9210730

CR2E034 (11/98)

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