PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Aug 30, 1999 8:00 am Secretary of State

08-30-1999 90005 036 ***550.00

	1999 DIVISION OF CORPORATIONS				ONS	08-30-1999 90005 036 ***550.00	
DOCU 1. Corporatio	MENT # P98000	039307			,		
BO'S BA	AR-B-Q GRILL, INC.					1 374 118 D. C. LAKET LEICH BOHN BONY BERIN BEIDS 1916 1816 11111 4 894 1981 1801	_
							=
Principal Place	e of Business	Mailing Address				T HBT BBF 1/6 10/20 10/14 20/11 80/11 00/11 20/10 11/10 11/10 11/10 11/10 11/10	
226-1 SOLANA ROAD PONTE VEDRA BEACH FL 32082 226-1 SOLANA ROAD PONTE VEDRA BEACH FL 32082							=
						DO NOT WRITE IN THIS SPACE	=
						3. Date incorporated or Qualifed	=
		* <u></u>				04/30/1998	=
	lace of Business	2a. Mailing Address				4. FEI Number Applied For Not Applied Sor	=
21	4 -10	Suite, Apt. #, etc.				\$8.75 Additional	
Suite, Apt.	#, e tc.	27				Certificate of Status Desired Fee Required	
City & State	6	City & State			Francis Lating	6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution Added to Fees	Ξ
Zip	Country Zip 29 31			Country		8. This corporation owes the current year Intangible Personal Property Tax.	=
24	g. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent	=
				81	Name	:	
BUSCHMAN, ALBERT E JR				82	Street Addre	ess (P.O. Box Number is Not Acceptable)	=
2215 SOUTH THIRD STREET				83			=
SUITE 101 JACKSONVILLE BEACH FL 32250				83			≡
JACKSCHTIELE BEACHTE GEEGE				84 City		FL 85 Zip Code	=
11 Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	, the ab	oove	-named corpo	oration submits this statement for the purpose of changing its registered	≣
office of the	egistered agent, or both, in the State	of Florida, Such change was auti tions of, Section 607,0505, Florid	horized la Statu	by t	the corporation	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered	=
SIGNATURE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
	Signature, typed or printed name of registered age	t and title if applicable. (NOTE: R D DIRECTORS	egistered .	Agent	t algnature required	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	(88/11)
12.	D	□ DELETE	1.1 717	Œ		Change Addition	٤Ξ
NAME	ZEBOUNI, SAL G		1.2 NAME			5	<u> </u>
STREET ADDRESS	226-1 SOLANA ROAD		1.3 STREET ADDRESS		ADDRESS	Conses C Addition C	# <u>=</u>
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32082		1.4 CITY-ST-ZIP		- ZIP	Change Addition	\frac{1}{2} \frac{1}{2}
TITLE	DELETE		21 TITLE 22 NAME				Ξ.
NAME			1.		ADORESS		=
STREET ADDRESS			2.4 CITY-ST-ZIP			<u> </u>	
CITY-ST-ZIP	☐ DELETE		3.1 TITLE			☐ Change ☐ Addition	
NAME			3.2 NA	ME		1	Ξ
**STREET ADDRESS					ADDRESS		_ _ _
CITY-ST-ZIP		DELETE	3.4. CI	-	T-ZIP .	☐ Change ☐ Addition	=
TITLE			4.1 TIT				=
NAME STREET ADDRESS					ADDRESS		≣
CITY-ST-ZIP			4.4 CIT	Y-ST	-ZIP		. =
TITLE		C) DELETE	5.1 TIT			☐ Change ☐ Addition	
NAME	,		5.2 NA				=
STREET ADDRESS		•	5.3 ST		ADDRESS -ZIP		=
CITY-ST-ZIP	<u> </u>	DELETE	5.1 TIT			Change Addition	
TITLE NAME		/	6.2 NA			· ·	
STREET ADDRESS		1	6.3 ST	REET	ADDRESS		
		T .	4		1		_

14. I hereby certify that the information supplied with this filling boes 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 supplier fital 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 of 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 an an apactorient with an address, with all other like empowered.

SIGNATURE:

RE REQU

185-2666