

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  
Apr 26, 1999 8:00 am  
Secretary of State

04-26-1999 90130 018 \*\*\*150.00

DOCUMENT # P980000395610K

1. Corporation Name

SOUTH PHILLY STEAKS & HOAGIES, INC.

Principal Place of Business

1000 Hwy. A-1-A  
Satellite Beach, FL  
32937

Mailing Address

4600 Babcock St. NE  
Palm Bay, FL 32905

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10-29-98

4. FEI Number

59-3506239

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

7. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

1000 Hwy. A-1-A  
Suite, Apt. #, etc.

2a. Mailing Address

4600 Babcock St. NE  
Suite, Apt. #, etc.

City & State

Satellite Beach, FL 32937

City & State

Palm Bay, FL 32905

Zip

Country

32937 25 USA

Zip

Country

32905 30 USA

9. Name and Address of Current Registered Agent

Albert S. Lagano, P.A.  
1803 Airport Blvd.  
Melbourne, FL 32901

10. Name and Address of New Registered Agent

81 Name

Star E. Grady

82 Street Address (P.O. Box Number is Not Acceptable)  
2134 Sandalwood Drive

83

84 City

Melbourne

FL

85 Zip Code

32935

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

Star E. Grady

STAR E. GRADY, SECRETARY/TREAS. 4/16/99

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 D/P ☒ DELETE

NAME Ralph P. Horan  
STREET ADDRESS 2550 Palm Bay Rd.  
CITY-ST-ZIP Palm Bay, FL 32905

TITLE D/S/T ☐ DELETE

NAME Paul R. Levy  
STREET ADDRESS 2550 Palm Bay Rd.  
CITY-ST-ZIP Palm Bay, FL 32905

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME Cher Drake  
1.3 STREET ADDRESS 1100 W. New Haven Ave.  
1.4 CITY-ST-ZIP Melbourne, FL 32904

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME Star Grady  
2.3 STREET ADDRESS 4600 Babcock St. NE  
2.4 CITY-ST-ZIP Palm Bay, FL 32905

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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:

Star E. Grady SECRETARY/TREASURER  
STAR E. GRADY

4/16/99

407-952-1500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

daytime Phone #

CR2E034 (1/98)