## 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

## DOCUMENT # P98000073406

1. Corporation Name

PNS TOO STEAK, INC.


## **FILED** Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90017 005 \*\*\*750.00



Principal Place	of Business	Mailing Address				
11224 BOARDWALK. SUITE B 1-5 P O BOX 40486 BATON ROUGE LA 70816 BATON ROUGE LA 70815-0486		DO NOT WRITE IN	N THIS SPACE			
					Date Incorporated or Qualifed	
					08/21/1998	
2 Oringinal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
	ace of business	26				Not Applicable
Suite, Apt.	# oto	Suite, Apt. #, etc	_			\$8.75 Additional
22 Suite, Apr.	#, etc.	27			Certificate of Status Desired	Fee Required
City & State	2	City & State	·		6. Election Campaign Financing	\$5.00 May Be
	<del>,</del>	28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Countr	v	This corporation owes the current y	year Intangible
	·8358 [25]	29 70535.0486		,	Personal Property Tax.	☐ Yes ☐ No
24 /0010	9. Name and Address of Currer		<del></del>	_	10. Name and Address of New Regis	stered Agent
	3. Name and Address of Conter	it Registered Agent	8	1 Name		
СТ	CORPORATION SYSTEM					
1200 SOUTH PINE ISLAND ROAD		8:	82 Street Address (P.O. Box Number is Not Acceptable)			
,	ITATION FL 33324		0.	83		
, ,	TATION 1 E 00024		0.	3		
			8-	1		FL 85 Zip Code
office or re	to the provisions of Sections 607 050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was au	ithorized b	y the corpora	orporation submits this statement for the purp ration's board of directors. I hereby accept the	ose of changing its registered appointment as registered
SIGNATURE						
	Signature, typed or printed name of registered age	· · · · · · · · · · · · · · · · · · ·		ent signature req	QUITED When reinstating)  ADDITIONS/CHANGES TO OFFICE	PATE
12.		ID DIRECTORS	13.	<del></del> 1	ADDITIONS/CHANGES TO OFFICE	Change Addition
TITLE	PD	☐ DELETE	1 : TIFLE			
NAME	LAWRENCE, JOHN C		1 2 NAME	]		
STREET ADDRESS	11224 BOARDWALK, SUITE B	1-5	13 STRE	ET ADDRESS		ľ
CITY-ST-ZIP	BATON ROUGE LA 70816		14 CITY-	ST-ZIP		
TITLE	VD	☐ DELETE	2 1 TITLE			Change Addition
NAME	Bresee, Jerry D		2.2 NAME	:		i
STREET ADDRESS	11224 BOARDWALK, SUITE B	1-5	23 STRE	ET ADDRESS		1
CITY-ST-ZIP	BATON ROUGE LA 70816		2.4 CITY	ST-ZiP		
TITLE	STD	☐ DELETE	31 TITLE			Change Addition
NAME	APPLETON, JOHN D		3.2 NAME	:		
STREET ADDRESS	DO ( DO) ( ) ( ) ( ) ( ) ( ) ( ) ( )	1-5	33STRE	ET ADDRESS		
CITY-ST-ZIP	BATON ROUGE LA 70816	• •	34 CITY	·ST-ZIP		
TITLE	5,110,11000E D110010	☐ DELETE	4 1 TITLE			Change Addition

CITY-ST-7IP 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.

4 2 NAME 4.3 STREET ADDRESS

51 TITLE

52 NAME

6 i TITLE

6.2 NAME

DELETE

□ DELETE

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

64 CITY-ST-ZIP

5.3 STREET ADDRESS

6 3 STREET ADDRESS

SIGNATURE:

TITLE NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(225)929.6063

Change

Change

☐ Addition

Addition