


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE
		Katherine Harris Secretary of State DIVISION OF CORPORATIONS

APPROVED
AND
FILED

99 OCT 15 AM 9:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000086998

1. Corporation Name

FRED'S FAMOUS BAR-B-QUE AND BREWERY, INC.

Principal Place of Business

8199-28TH AVE. N.
ST. PETERSBURG FL 33710

Mailing Address

8199-28TH AVE. N.
ST. PETERSBURG FL 33710

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

7551 4th ST N

Suite, Apt. #, etc.

4351 - 4th ST N

City & State

St Pete FL

City & State

ST. PETERSBURG, FL

Zip

33703

Country

USA

Zip

33703

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

10/09/1998

5. FEI Number

59-3563097

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
VP	FLEMING, FREDERICK	8199-28TH AVE. N.	ST. PETERSBURG FL 33710
P. D	STORMAN, BRIAN	1901 IOWA Ave NE	ST. PETERSBURG, FL 33703
DST	REHNKE, TAMARON F.	6606-10th Ave. N.	St. Petersburg, FL 33710

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****750.00 ****750.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

FOSTER, DAVID W
555 FOURTH ST. N.
ST. PETERSBURG FL 33710

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

David W. Foster
REGISTERED AGENT MUST SIGN

Date Oct. 13, 1999

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
FREDERICK FLEMING

Date

Daytime Phone #

CR2004 (6/99)