## 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 # P98000089134

1. Corporation Name

A & S RESTAURANT, INC.

Driveinel Disea of Business

Mailing Addross

## FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90134 046 \*\*\*150.00



4700 COUTINE					l l						
4703 SOUTHWEST 24TH PLACE CAPE CORAL FL 33914		4703 SOUTHWEST 24TH PLACE CAPE CORAL FL 33914				Đ	O NOT WRI	TE IN THIS	SPACE		
					3. Da	te Incorporated	or Qualifed				
						/20/1998					
2 Dringing D	ace of Business	2a. Mailing Address				Number			An	plied For	ı
<del></del> -	dee of Busiliess	<b>⊢</b> ,			1 7	5-04	アクト	76	المستحدث المستحدث	t Applicable	
21	4 -4-	Suite, Apt. #, etc.			_ <del> </del>	<u> </u>	700	<u>ب د</u>	\$8.75		l
Suite, Apt.	#, etc.	<b>⊢</b> '''			5. Ce	rtifcate of Statu:	s Desired		Fee Re		
22	· · · · · · · · · · · · · · · · · · ·	City & State					- Cinemator			•	ļ.
City & State		<b>⊢</b> ′			1	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
23	Country	Zip Country			-+-	Trust Fund Contribution Added to Fees  8. This corporation owes the current year Intangible					
Zip	on the contract of a second	H			I	rsonal Property		en year nic	⊿rigible □Yes	□No ~	٠.
24	9. Name and Address of Current I	11	30			me and Addre		tegistered			l
<del></del>	5. Name and Address of Current	registered Agent		81 Name					ــد-		l
AME	RILAWYER				WERK		SCH		<u>Z</u>		l
	ALMERIA AVENUE			82 Street A	Address (P.Q.	Box Number is	Not Accepta	ble) Pl	ace		1
	AL GABLES FL 33134			83	7703	310 2	x 7/L	<u> </u>	<del>-10 -</del>		
0011	The Carlotte of the same										l
				84 City	PPE C	ORA	L	FL	85 Zip	39/4	
11. Pursuant I	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the a	hove comed	corporation eu	hmite this state	ment for the	purpose of	changing its	registered	l
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligatio	Florida. Such change was au	uthorized	by the corpo	oration's board	of directors. I h	ereby accep	ot the appoi	munem as re	gistered	
SIGNATURE	SIgnature, typed or printed name of registered agent a	and title if applicable. (NOTE:	Registered	Agent signature re	equired when rems.	ating)	4.1	DATE			-
12,	OFFICERS AND		13.		ADD	DITIONS/CHAN	GES TO OF	FICERS AN	ND DIRECTO	RS IN 12	(11/98
TITLE	PD	☐ DELETE	1,1 TI	TLE			• !	7 (See 1977)	☐ Change	Addition	1
NAME	SCHMITZ, WERNER		1.2 NA	AME					,	•	
STREET ADDRESS	4703 SOUTHWEST 24TH PLACE		1,3 ST	REET ADDRESS							R2F034
CITY-ST-ZIP	CAPE CORAL FL 33914			l l							
OIT 1-01-24			1.4 CF	TY-ST-ZIP I							િ
TITLE		DELETE	1.4 CF 2.1 TI	TY-ST-ZIP TLE					Change	Addition	9
TITLE	VO	☐ DELETE	_	TLE						Addition	S. S.
NAME	VD AHR, PETER R	<del>-</del>	2.1 TI 2.2 N/	TLE AME	1902	SE 101	+4 P(A	ce		Addition	S. C.
NAME STREET ADDRESS	VD AHR, PETER R 4703 SOUTHWEST 24TH PLACE	<del>-</del>	2.1 TT 2.2 N/ 2.3 ST	TLE AME TREET ADDRESS	1902	SE 101	44 P(A .FL -	ce 3399		Addition	S
NAME STREET ADDRESS CITY-ST-ZIP	VD AHR, PETER R 4703 SOUTHWEST 24TH PLACE CAPE CORAL FL 33914		2.1 TI 2.2 N/ 2.3 ST 2.4 C	TLE AME TREET ADDRESS ITY-ST-ZIP	1902 Cape	SE 101 Corq	14 P(A ,FL.	ce 3399		Addition	CR2
NAME STREET ADDRESS CITY-ST-ZIP TITLE	VD AHR, PETER R 4703 SOUTHWEST 24TH PLACE CAPE CORAL FL 33914 SD	<del>-</del>	2.1 TI 2.2 NA 2.3 ST 2.4 CI 3.1 TI	TLE AME TREET ADDRESS ITY-ST-ZIP TLE	1902 Cape	SE 10.	H P(Q ,FL.	ce 3399	0	·	CRO
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	VD AHR, PETER R 4703 SOUTHWEST 24TH PLACE CAPE CORAL FL 33914 SD AHR, SABINE	DELETE	2.1 TT 2.2 NA 2.3 ST 2. 4 CT 3.1 TT 3.2 NA	TLE AME TREET ADDRESS ITY-ST-ZIP TLE AME					Change	·	CRO
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VD AHR, PETER R 4703 SOUTHWEST 24TH PLACE CAPE CORAL FL 33914 SD AHR, SABINE -4703-SOUTHWEST-24TH PLACE	DELETE	2.1 TI 2.2 N/ 2.3 ST 2. 4 CI 3.1 TI 3.2 N/ 3.3 ST	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME  TREET ADDRESS					Change	·	CR2
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD AHR, PETER R 4703 SOUTHWEST 24TH PLACE CAPE CORAL FL 33914 SD AHR, SABINE -4703-SOUTHWEST-24TH PLACE CAPE CORAL FL 33914	☐ DELETE	2.1 TI 2.2 NA 2.3 ST 2.4 CI 3.1 TI 3.2 NA 	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME  TREET ADDRESS- ITY-ST-ZIP		SE 10: Cora( SE=1.0+ Cora(			Change	·	CRO
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	VD AHR, PETER R 4703 SOUTHWEST 24TH PLACE CAPE CORAL FL 33914 SD AHR, SABINE 4703 SOUTHWEST 24TH PLACE CAPE CORAL FL 33914 TD	DELETE	2.1 TT 2.2 NA 2.3 ST 2.4 CC 1.3.1 TT 3.2 NA 3.4. CC 4.1 TT	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME  FREET ADDRESS- ITY-ST-ZIP  TLE					80 ⊠Change	☐ Addition	CBC
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	VD AHR, PETER R 4703 SOUTHWEST 24TH PLACE CAPE CORAL FL 33914 SD AHR, SABINE -4703 SOUTHWEST: 24TH PLACE CAPE CORAL FL 33914 TD SCHMITZ, HANNELORE	☐ DELETE	2.1 TT 22 NA 2.3 ST 2.4 CC 3.1 TT 3.2 NA 3.3 ST 3.4 CC 4.1 TT 4.2 NA	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME  PREST ADDRESS-  ITY-ST-ZIP  TLE  AME					80 ⊠Change	☐ Addition	CB2
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STPEET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VD AHR, PETER R 4703 SOUTHWEST 24TH PLACE CAPE CORAL FL 33914 SD AHR, SABINE -4703-SOUTHWEST: 24TH PLACE CAPE CORAL FL 33914 TD SCHMITZ, HANNELORE 4703 SOUTHWEST 24TH PLACE	☐ DELETE	2.1 TT 2.2 NA 2.3 ST 2.4 CC 3.1 TF 3.2 NA	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TREET ADDRESS- ITY-ST-ZIP  TLE  AME  TREET ADDRESS- ITY-ST-ZIP  TLE  AME					80 ⊠Change	☐ Addition	CR2
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STPEET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD AHR, PETER R 4703 SOUTHWEST 24TH PLACE CAPE CORAL FL 33914 SD AHR, SABINE -4703 SOUTHWEST: 24TH PLACE CAPE CORAL FL 33914 TD SCHMITZ, HANNELORE	☐ DELETE	2.1 TT 2.2 N/2 2.3 ST 2.4 CC 3.1 TF 3.2 N/2 3.4 CC 4.1 TF 4.2 N/4 4.3 ST 4.4 CC	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME  PREST ADDRESS-  ITY-ST-ZIP  TLE  AME  FREST ADDRESS-  TLE  TREET ADDRESS  TREST ADDRESS  TY-ST-ZIP					Change  ☐ Change	☐ Addition	CB2
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STPEET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TREET ADDRESS CITY-ST-ZIP TITLE	VD AHR, PETER R 4703 SOUTHWEST 24TH PLACE CAPE CORAL FL 33914 SD AHR, SABINE -4703-SOUTHWEST: 24TH PLACE CAPE CORAL FL 33914 TD SCHMITZ, HANNELORE 4703 SOUTHWEST 24TH PLACE	☐ DELETE	2.1 TT 2.2 N 2.3 ST 2.4 CC 3.1 TF 3.2 N 3.4 CC 4.1 TF 4.2 N 4.3 ST 4.4 CF 5.1 TF	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME  FREET ADDRESS- ITY-ST-ZIP  TLE  AME  FREET ADDRESS- TLE  TREET ADDRESS  TY-ST-ZIP  TLE  TY-ST-ZIP  TLE  TY-ST-ZIP  TLE					80 ⊠Change	☐ Addition	CBO
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STPEET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD AHR, PETER R 4703 SOUTHWEST 24TH PLACE CAPE CORAL FL 33914 SD AHR, SABINE -4703-SOUTHWEST: 24TH PLACE CAPE CORAL FL 33914 TD SCHMITZ, HANNELORE 4703 SOUTHWEST 24TH PLACE	☐ DELETE	2.1 TT 2.2 N/ 2.3 ST 2.4 CC 3.1 TT 3.2 N/ 3.4 CC 4.1 TT 4.2 N 4.3 ST 4.4 CC 5.1 Tt 5.2 N/	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME  PREST ADDRESS-  ITY-ST-ZIP  TLE  AME  FREET ADDRESS-  TY-ST-ZIP  TLE  TY-ST-ZIP  TLE  TY-ST-ZIP  TLE  TY-ST-ZIP  TLE  TY-ST-ZIP  TLE  TY-ST-ZIP					Change  ☐ Change	☐ Addition	CBO
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STPEET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TREET ADDRESS CITY-ST-ZIP TITLE	VD AHR, PETER R 4703 SOUTHWEST 24TH PLACE CAPE CORAL FL 33914 SD AHR, SABINE -4703-SOUTHWEST: 24TH PLACE CAPE CORAL FL 33914 TD SCHMITZ, HANNELORE 4703 SOUTHWEST 24TH PLACE	☐ DELETE	2.1 TT 2.2 N/ 2.3 ST 2.4 CC 3.1 TT 3.2 N/ 3.3 ST 3.4 . CC 4.1 TT 4.2 N/ 4.3 ST 4.4 CC 5.1 Ti 5.2 N/ 5.3 ST	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME  TREET ADDRESS-  ITY-ST-ZIP  TLE  AME  TREET ADDRESS  TY-ST-ZIP  TLE  AME  TREET ADDRESS  TY-ST-ZIP  TLE  AME					Change  ☐ Change	☐ Addition	CBO
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STPEET 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	VD AHR, PETER R 4703 SOUTHWEST 24TH PLACE CAPE CORAL FL 33914 SD AHR, SABINE -4703-SOUTHWEST: 24TH PLACE CAPE CORAL FL 33914 TD SCHMITZ, HANNELORE 4703 SOUTHWEST 24TH PLACE	DELETE	2.1 TT 2.2 N/ 2.3 ST 2.4 CC 3.1 TT 3.2 N/ 3.4 CC 4.1 TT 4.2 N 4.3 ST 4.4 CC 5.1 Tt 5.2 N/ 5.3 ST 5.4 CC	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME  PREST ADDRESS-  ITY-ST-ZIP  TLE  AME  FREET ADDRESS-  TY-ST-ZIP  TLE  TY-ST-ZIP  TLE  TY-ST-ZIP  TLE  TY-ST-ZIP  TLE  TY-ST-ZIP  TLE  TREET ADDRESS  TY-ST-ZIP  TREET ADDRESS  TY-ST-ZIP					Change	Addition  Addition	280
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	VD AHR, PETER R 4703 SOUTHWEST 24TH PLACE CAPE CORAL FL 33914 SD AHR, SABINE -4703-SOUTHWEST: 24TH PLACE CAPE CORAL FL 33914 TD SCHMITZ, HANNELORE 4703 SOUTHWEST 24TH PLACE	☐ DELETE	2.1 TT 2.2 N/ 2.3 ST 2.4 CC 3.1 TT 3.2 N/ 3.3 ST 3.4 . CC 4.1 TT 4.2 N 4.3 ST 4.4 CC 5.1 TT 5.2 N/ 5.3 ST 5.4 CG 6.1 TT	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME  PREGT ADDRESS-  ITY-ST-ZIP  TLE  AME  FREET ADDRESS  TY-ST-ZIP  TLE  TLE  TLE  TLE  TLE  TLE  TLE  TL					Change  ☐ Change	☐ Addition	280
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STPEET 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	VD AHR, PETER R 4703 SOUTHWEST 24TH PLACE CAPE CORAL FL 33914 SD AHR, SABINE -4703-SOUTHWEST: 24TH PLACE CAPE CORAL FL 33914 TD SCHMITZ, HANNELORE 4703 SOUTHWEST 24TH PLACE	DELETE	2.1 TT 2.2 N/ 2.3 ST 2.4 CC 3.1 TT 3.2 N/ 3.3 ST 3.4 . CC 4.1 TT 4.2 N/ 4.3 ST 4.4 CC 5.1 TT 5.2 N/ 5.3 ST 5.4 CC 6.1 TT 6.2 N/	TLE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME  PREGT ADDRESS-  ITY-ST-ZIP  TLE  AME  FREET ADDRESS  TY-ST-ZIP  TLE  TLE  TLE  TLE  TLE  TLE  TLE  TL					Change	Addition  Addition	280

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 autochment with an address, with all other like empowered.

SIGNATURE: