8/29/00-90033-009-$550.00-$550.00

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000038823

1. Entity Name
JOLLY GOOD RESTAURANTS, INC.

FILED
00 OCT 23 AM 11:58
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business	Mailing Address
4134 GULF OF MEXICO DRIVE. SUITE 302 LONGBOAT KEY FL 34228	4134 GULF OF MEXICO DRIVE. SUITE 302 LONGBOAT KEY FL 34228

← chg → see enclosed

REINSTATEMENT

2. Principal Place of Business	3. Mailing Address
1255 N. GULFSTREAM AVE	1255 N. GULFSTREAM AVE
Suite, Apt. #, etc.: 803	Suite, Apt. #, etc.: 803
City & State: SARASOTA FL.	City & State: SARASOTA FL.
Zip: 34236 Country: USA	Zip: 34236 Country: USA

4. FEI Number: 65-0916575 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SNOOK, PHILIP
4134 GULF OF MEXICO DRIVE, SUITE 302
LONGBOAT KEY FL 34228

7. Name and Address of New Registered Agent

Name: ANITA CARTOLANO. M. (MIDDLE INITIAL)
Street Address (P.O. Box Number Is Not Acceptable): 1255 N. GULFSTREAM AVE. APT 803
City: SARASOTA FL Zip Code: 34236

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: Anita M. Cartolano DATE: 8.12.00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $550.00
After SEPTEMBER 13, 2000 Min. will be $750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SNOOK, PHILIP 4134 GULF OF MEXICO DRIVE, SUITE 302 LONGBOAT KEY FL 34228	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CARTOLANO, ANITA 4134 GULF OF MEXICO DRIVE, SUITE 302 LONGBOAT KEY FL 34228	☐ Delete	PD ANITA M. CARTOLANO 1255 N. GULFSTREAM AVE., APT 803 UNIT SARASOTA FL 34236	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	VD ANNE GWINN 1408 MARGATE AVE. ORLANDO FL 32803	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	500003455805--1 -11/07/00--01103--008 *****200.00 *****200.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (5/00)

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Anita M. Cartolano 8.12.00 KE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone: (941) 954-6702