2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS DOCUMENT # P99000058229 1. Entity Name EOLA TAVERN, INC. 05 JUL 20 PM 12: 53 Principal Place of Business Mailing Address 301 E PINE STREET **301 E PINE STREET** SUITE 100 SUITE 100 ORLANDO, FL 32801 ORLANDO, FL 32801 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07152005 Chq-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 59-3587831 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MARKEY & FOWLER, PA-Street Address (P.O. Box Number is Not Acceptable) 25 MCLEOD STREET MERRITT ISLAND, FL 32953 City Zip Code FL 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 Fiorida | am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and tale if applicable (NOTE: Registered Agent signature required when reinstahlig) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 7, 2005 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. ☐ Delete TITLE Change ☐ Addition TUTE NAME RYSER, CANDIE NAME U00058045880 STREET ADDRESS STREET ADDRESS 30 JAMES AVE CITY-ST-ZIP ORLANDO, FL 32801 CITY-ST-ZIP **150 ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ■ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIF CITY-ST-ZIP 12. Hereby certify that the information supplied with this filling 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 suppliemental 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 regeliger pr true age empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachme like empowered SIGNATURE: SIGNING OFFICER OR DIRECTOR RE AND TYPED OR PRIN Daytime Phone

Sam Snead's Restaurant Candie Ryser 301 E. Pine Street Orlando, Fl 32801 407 999 0109

July 26, 2005

Dear Mr. Gary Blanckenbaker,

I have never received the first reminder to file our annual report. Also, in my last correspondences I included a check on July 12, but it must have gotten lost with the paperwork as we discussed on the phone today. I would like to ask you kindly to waive the late fee, due to the fact that we never received a first reminder. Could you please call me when you receive this correspondences so I can rest assured that this matter is taken care off. I like to thank you in advance for all your help with this matter.

Have a great day,

owner