

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 NOV 19 AM 10:58

DOCUMENT # S52061
1. Corporation Name
Chickies Club South, INC.
DBA G.W. Sharky's Raw Bar & Grill

Principal Place of Business Mailing Address
2388 University Drive
Coral Springs, FL 33065

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEI Number	Applied For
21. G.W. Sharky's	26. G.W. Sharky's	5-1-91	65-0260033	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired		\$8.75 Additional Fee Required
22. N/A	27. N/A	<input type="checkbox"/>		
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
23. Coral Springs, FL	28. Coral Springs, FL	<input type="checkbox"/>		
Zip	Zip	8. This corporation owes the current year Intangible Personal Property Tax.	Country	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
24. 33065	29. USA		30. USA	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
Robin Stanton 4240 NW 58th Lane Boca Raton, FL 33496	81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. City 84. City 85. FL 86. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505 Florida Statutes.

SIGNATURE: Robin Stanton 11/15/99
Signature, typed or printed name of registered agent and title if applicable (Typed or Printed Name of Registered Agent Signature Required when Retesting)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Robin Stanton	1.2 NAME	
STREET ADDRESS	4240 NW 58th Lane	1.3 STREET ADDRESS	700003050277--0
CITY-ST-ZIP	Boca Raton, FL 33496	1.4 CITY-ST-ZIP	-11/22/99--01005--020
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	****158.00 ****150.00
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE: Robin Stanton - Robin Stanton 11/15/99 954-341-9990
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CRZE034 (11/98)

THOMAS M. COSTELLO, C.P.A., P.A.
CERTIFIED PUBLIC ACCOUNTANT

1300 NORTH FEDERAL HIGHWAY
SUITE 202
BOCA RATON, FLORIDA 33432-2848

THOMAS M. COSTELLO, CPA
JOHN F. COSTELLO, CPA

BOCA RATON (561) 391-6444
BROWARD (954) 427-2727
WEST PALM BEACH (561) 736-5505
FAX (561) 391-6609
E-MAIL: tmccpa@bellsouth.net

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

To whom it may concern,

Please find enclosed payment of the corporate annual report fee of \$150. We are requesting that you reinstate the corporation with the payment of this fee and that you waive the penalties for reasonable cause.

During 1998 the corporation was sold by Greg Wentworth to Robin Stanton. It appears that this caused some confusion in the filing of the annual report for 1999. Mrs. Stanton does not recollect receiving the annual report and she has indicated that she is very efficient in responding to official matters such as this.

In light of these circumstances she request that you consider abating the penalties for reasonable cause and reinstate the corporation without the payment of the penalty.

Sincerely,

Thomas M. Costello, CPA