

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

PROFIT CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED

1995 JUL 27 AM 10:18

TALLAHASSEE, FLORIDA

DOCUMENT # S59714 (3)

1. Corporation Name
PALM BEACH ALE HOUSE AND RAW BAR, INC.

Principal Place of Business Mailing Address
2161 PALM BEACH LAKES BLVD. 2161 PALM BEACH LAKES BLVD.
SUITE 403 SUITE 403
W. PALM BEACH FL 33409 W. PALM BEACH FL 33409

DO NOT WRITE IN THIS SPACE

| | |
|---|--|
| 3. Date Incorporated or Qualified 06/14/1991 | 3a. Date of Last Report 08/02/1994 |
| 4. FEI Number 65-0285227 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Finance and Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |

| | | | |
|--|---|---------------|---------------|
| 2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 | 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 25 | Country 29 | Country 30 |
|--|---|---------------|---------------|

9. Name and Address of Current Registered Agent
**PREEFER, JAY C.
2161 PALM BEACH LAKES BLVD.
SUITE 403
W. PALM BEACH FL 33409**

10. Name and Address of New Registered Agent

| | |
|---|-------------|
| 81 Name | 85 Zip Code |
| 82 Street Address (P.O. Box Number is Not Acceptable) | |
| 83 | |
| 84 City | FL |

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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 _____ (Signature, Typed or Printed Name of Registered Agent and Mailing Address) (NOTE: Registered Agent signature required when registering) DATE _____

| 12. OFFICERS AND DIRECTORS | | 13. ALTERNATE OFFICERS AND DIRECTORS | |
|--|---|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DP PREEFER, RICHARD 2161 PALM BEACH LAKES W. PALM BEACH FL | 11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | 41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | 61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(A), Florida Statutes. I further certify that the information indicated on this annual report or supplement to the 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 applicable) or on an attachment with an address.

SIGNATURE: _____ (Signature and Typed or Printed Name of Signing Officer or Director) **Richard Preefer** Date: **6/27/95** Chapter/Para #: **407-689-7706**

CF2E034 (3/95)