FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

BONEFISH WILLY'S, INC.

| FILI | ED . |
|------------|-----------|
| Mar 27 199 | 98 8:00am |
| Secretary | of State |

| Pri | incinal Plac | e of Business | Mailing Address | | | | - 1 1001/6/6/6/1/ (1004/17/17/) (1017/0/1/1/ 0/1/ 0/1/ 0/1/ 0/1/ 0/1/ 0/1 | |
|---------------------|---|--|--------------------------------------|-----------------|---|--------------------|--|--------|
| ĺ | • | | | • | | | | |
| | 1269 UNIVERSITY DRIVE 1269 UNIVERSITY DRIVI CORAL SPRINGS FL 33071 CORAL SPRINGS FL 33 | | | | 71 | | | |
| | OGINE OIL | | 00,4.2 0,7.1.100 (0.00) | .,, | | • | DO NOT WRITE IN THIS SPACE | |
| | | | | | | | 3. Date Incorporated or Qualified | |
| | | | | | | | 08/26/1991 | _ |
| _ | Principal P | lace of Business | 2a. Mailing Address | | | | 4. FEI Number Applied For | 4 |
| 21 | | | 26 | | | | 65-0282489 Not Applicable | e |
| Sulte, Apt. #, etc. | | | | | 5. Certificate of Status Desired Sa.75 Additional | | | |
| 22 | | | | | Fee Required | | | |
| | City & State | e | City & State | | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | |
| 23 | Zip | Country | Zip Cou | | ntry | | This corporation owes or has paid the current year Intangible | ┥ |
| 24 | P | 25 | <u>├</u> ─┐ | 30 | , | | Personal Property Tax due June 30. Yes No | - |
| 24 | | 9. Name and Address of Curre | | 50, | _ | | 10. Name and Address of New Registered Agent | ᅥ |
| | R | RUCK, DANIEL J. | | | 81 | Name | | ٦ |
| | | 269 UNIVERSITY DR | | | 20 | Oten at Antal | In a part of the factor of the | |
| | | ORAL SPRINGS FL 33071 | | | 82 | Street Add | lress (P.O. Box Number is Not Acceptable) | |
| | · | OTTLE OF THIT GO T E GOOT | | | 83 | | | ヿ |
| | | | | | | | | ᅴ |
| | | | | | 84 | City | FL 85 Zip Code | |
| 11 | Pursuant | to the provisions of Sections 607.05 | 502 and 607.1508, Florida Statute | s, the at | 00V6 | e-named corp | noration submits this statement for the nurrose of changing its registered | ī |
| | office or r | egistered agent, or both, in the Stati im familiar with, and accept the obli- | te of Florida. Such change was at | uthorize | d by | the corpora | tion's board of directors. I hereby accept the appointment as registered | |
| ٠. | _ | in laminal with, and accept the obje | gations of deciron our toods, i for | noa biai | utos | | | |
| SI | GNATURE | Signature, typed or printed name of registered a | igent and tille if applicable. (NOTE | : Registered | d Age | nt signature requi | ired when reinstating) DATE | ٠ |
| 12 | | OFFICERS A | ND DIRECTORS | 13, | | · | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| ŢIŤ | LE. | D | ☐ DELETE | 1.1 TF | TLE | | Change Addition | n |
| NA | ME | BRUCK, DANIEL J. | | 1.2 N/ | ME | | | |
| STE | EET ADDRESS | 2392 NW 122 DRIVE | | 1.3 STRE | | ADDRESS | | |
| CIT | Y-ST-ZIP | CORAL SPRINGS FL | | 1.4 CI | 1Y-S | 7-ZIP | | ╝ |
| TIT | LE | D | DELETE | 2.1 TITLE | | | Change Addition | n |
| NA | ME | TARABOULOS, DAVID I. | | 2.2 NAME | | | | ļ |
| ST | REET ADDRESS | 847 N.W. 76 TERRACE | | 2.3 STREE | | ADDRESS | | ١ |
| CIT | Y-ST-ZIP | PLANTATION FL | | 2. 4 CITY | | ST-ZIP | | ┙ |
| TIT | LE | 8 | ☐ DELETE | 3.1 TI | TLE | | Change Addition | ٩l |
| NA | ME | DESIREE BRUCK | | 3.2 NA | ME | - | | - 1 |
| STF | IEET ADDRESS | 2392 NW 122 DR | | 3.3 STREE | | ADDRESS | | ł |
| CIT | Y-ST-ZIP | CORAL SPRINGS FL | | 3.4. C | ITY-S | IT-ZIP | | ╝ |
| TIT | LE | VP | ☐ DELETE | 4.1 TI | ILE | | ☐ Change ☐ Addition | n [|
| NA | ME | ALLEN TARABOULOS | | 4.2 N | AME | İ | | |
| STE | ieet address | 118 MOHIGAN CR | | 4.3 STRE | | ADDRESS | | |
| CIT | Y-ST-ZIP | BOCA RATON FL | | 4.4 CITY | | T - 21P | | _ |
| ŢIŢ | LΕ | | DELETE | 5.1 TITLE | | | ☐ Change ☐ Addition | n |
| NAI | ME | | | 5.2 NAME | | | | 1 |
| STF | REET ADDRESS | | | 5.3 STREE | | ADDRESS | | - |
| CIT | Y-ST-ZIP | | | 5.4 CITY | | T-ZIP | | \Box |
| TITI | LE | | ☐ DELETE | 6.1 TITLE | | | Change Addition | n |
| NAI | ME | | | 6.2 NAME | | | | |
| STF | REET ADDRESS | | | 63 ST | REET | ADDRESS | | |
| CITY-ST-ZIP 64 CIT | | | | | _ | | | |
| STF | REET ADDRESS | will that the information or william | with this filing does not evally to | 63 ST 6.4 CE | REET | T-ZIP | Scotice 119 07(3)(i) Florida Statutas Liurther certify that the information | _ |

I nereby 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 informatio 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.