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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

AN	INUAL REPO 1997 UMENT	ORT	Secre DIVISION OI	B. Morti etary of Sta F CORPOF	te		Secretar	y of S	tate	
Principal Place of Business Mailing Address 4801 - 95TH ST., N. ST. PETERSBURG FL 33708 ST. PETERSBURG FL 33708										
US			00				3. Date Incorporated or Qualified	3a. Date of La		
2. Princip	oal Place of Busin	ness	2a. Mailing Address				09/03/1991 4. FEI Number	01/24/1990	Applied For	\dashv
21			26				59-3084131		Not Applicab	e
Suite, /	Apl. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired Fee Regulred			
City &	State	···	City & Stale				6. Election Campaign Financing \$5.00 May Be			7
23			28		untry		Trust Fund Contribution		ed to Fees	_
Zip 24		Country Zip 29					8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No			
241	9. Name	and Address of Curre		30	T -		10. Name and Address of New Re			\dashv
Н	KAMILTON, JOH	IN R.			81	Name				٦
1304 PASS-A-GRILL					82	Street Address (P.O. Box Number is Not Acceptable)				4
ST. PETERSBURG BEACH FL 33706										4
					83					┙
					84	City		FL 85 2	Zip Code	ı
office agent SIGNATU	or registered ag t. Lam familiar wi	ent, or both, in the Stat th, and accept the oblig or printed name of registered as	e of Florida. Such change wa gations of, Section 607.0505,	s authorize Florida Sta	ed by tutes	the corpora	poration submits this statement for the pation's board of directors. I hereby acception when reinstating)	of the appointment	as registered	
12.		OFFICERS AF	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC			$\exists i$
THILE		DP DELETE HAMILTON, JOHN R.						L Chan	ge 🗌 Additio	n §
NAME STREET AODR	1001 515	S A GRILLE WAY		1.2 N		ADDRESS				
DITY-ST-ZIP	AT DEST	BEACH FL				T-ZIP				
TITLE	DS							Chan	ge Additio	<u>.</u>
NAME		N, LINDA L.		2.2 N	AME	(Į
STREET ADOR	AT 0	S A GRILLE WAY BEACH FL				ADDRESS				ı
CITY-ST-ZIP	SI. PEIE	DEAUN FL	DELETE	2.40		ST - ZiP		Chan	ge Additio	\exists
NAME				3.2 N)			,,	
STREET ADDR	ESS					ADDRESS				
CHY-SI-ZIP				3.4. 0	CITY-S	ST - ZIP				
TITLE			DELETE	4.1 T				☐ Chan	ge 🗌 Additio	n
NAME CIRCLI ADDR	EDC.				NAME TOCKT	4000000	:			
STREET ADDR CITY - ST - ZIP						ADDRESS T. 7/D				
TITLE					4 CITY-ST-ZIP			Chan	ge Additio	\exists
NAME:				5.2 N	AME	.				
STREET ADDR	ESS			5.3 S	TREET	ADDRESS	•			
CITY-ST-ZIP			Therese			1 - ZIP			. 1 1200	_
TITLE			DELETE	6.1 T				☐ Chan	ge 🔲 Additio	Л
NAME STREET ADDRI	F SS			6.2 N		ADDRESS				
CITY-ST-ZIP				I '	ITY-S					
		the information supplied	ed with this filing does not out				d in Section 119.07(3)(i). Florida Statute	s I further certify t	hat the	\dashv

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 configration 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.

FILED

Feb 18 1997 8:00am