

**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. Matham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 JUL -5 AM 8:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V02226

(1)

1. Corporation Name

PARK LANDING BISTRO, INC.

Principal Place of Business

Mailing Address

**2027 INNER CIR DR S
ST PETERSBURG FL 33712**

**2027 INNER CIR DR S
ST PETERSBURG FL 33712**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/26/1991

3a. Date of Last Report

05/31/1994

4. FEI Number

59-3105954

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

7. This corporation has liability for delinquent fee under s. 190.005
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

2a

State, Apt. #, etc.

State, Apt. #, etc.

22

27

City & State

City & State

23

28

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LEES, RONALD LANDSEE
2027 INNER CIR DR S
ST PETERSBURG FL 33712**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83

84. City

FL

85. 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 provisions of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Registered Agent (Required after changing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	D
NAME	LEES, RONALD LANDSEE
STREET ADDRESS	2027 INNER CIR DR S
CITY, ST, ZIP	ST PETERSBURG FL
2. TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
3. TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
4. TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
5. TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
6. TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1. TITLE	Change ☐ Action ☐
NAME	LEES RONALD LANDSEE
STREET ADDRESS	1026 MONTEREY BLVD N.E
CITY, ST, ZIP	ST. PETE, FLORIDA 33704
2. TITLE	Change ☐ Action ☐
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
3. TITLE	Change ☐ Action ☐
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
4. TITLE	Change ☐ Action ☐
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
5. TITLE	Change ☐ Action ☐
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
6. TITLE	Change ☐ Action ☐
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

14. I hereby certify that the information supplied in this report is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(2)(b), Florida Statutes. I further certify that the information submitted on this report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation, or the officer or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Item 12 or Item 13 of this report, or is an alternate agent with an address.

SIGNATURE:

SIGNATURE AND PRINTED OR WRITTEN NAME OF SIGNING OFFICER OR DIRECTOR

6/29/95 408-0203

CR2E034 (3/95)