## 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

## DOCUMENT # V30222

Corporation Name

••	SALTY'S	BY THE SEA, INC.					ļ				
_	in single Ologo	of Business	Mailing Address				$\dashv$	Į INDII DISTOP TILII BUSIO LIDIO		/	I) #1811 1981
110	incipal Place 073 FRONT BO NAMA CITY FI	CH RD.	2241 COCHRAN RD. PANAMA CTY FL 32408 US			ļ	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified				
								04/17/1992		<del></del>	
2.	Principal Pla	ce of Business	2a. Mailing Address					4. FEI Number		<del></del>	ied For
21			26					<u>59-3124879</u>			Applicable
22	Suite, Apt. #	, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 Ad Fee Req	
22	City & State		City & State					6. Election Çampaign Financing	<b>:</b> □	\$5.00 ⋈	
23			28					Trust Fund Contribution		Added to	Fees
	Zip	Country 25	Zip 29	30	Country			This corporation owes the cu     Personal Property Tax.		Yes L	□No
24		9. Name and Address of Curre		15.5	<u> </u>			10. Name and Address of New	Registered /	Agent	
$\vdash$					81	Name				•	
l l		; CHERYL 3 FRONT BEACH ROAD			82	Street	Addres	is (P.O. Box Number is Not Accept	otable)		
		MA CITY BEACH FL 32407			83						
ļ					84	City				85 Zip Co	ode
						<u> </u>			FL.	changing its r	enistered
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the a office or registered agent, or both, in the State of Florida. Such change was authorized agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statute.							corpor fration	's board of directors. I hereby acc	ept the appoir	ntment as regi	istered
1	CNATURE	('horul t	mae		1 1	$\times$ 1		·	DATE DATE	4-7-	L
		Signature, typed of printed name of registered a	30	(NOTE: Re	distared Age	ft signature	required w	when reinstating) ADDITIONS/CHANGES TO C		D DIRECTOR	RS IN 12
⊢	<del>2</del>		AND DIRECTORS	TF.	1.1 TITLE		Τ –	/IDDINIO(10101010	-	☐ Change	☐ Addition
1	TLE	DACE ALLEN	_ 5111		1,2 NAME						
		PAGE, ALLEN 11073 FRONT BEACH ROAD	1		1.3 STREET ADDRESS		3				
	REET ADDRESS	PANAMA CITY BCH FL			1.4 CITY-S						
-	TY-ST-ZIP TLE	D	☐ DELE	ΤE	2.1 TITLE					☐ Change	Addition
İ	AME	PAGE, CHERYL			2.2 NAME						
1	TREET ADDRESS	11073 FRONT BEACH ROAD	)		2.3 STREE	T ADDRESS	3				
	ITY-ST-ZIP	PANAMA CITY BCH FL	,		2. 4 CITY-	ST-ZIP					
_	TLE	TAIVAN OIT BOILE	☐ DELE	TE	3.1 TITLE		T.,	<del></del>		Change	· Addition
ļ.	AME				3.2 NAME						
	TREET ADDRESS				3.3 STREE	TADDRESS	s				, , .
	ITY-ST-ZIP				3.4. CITY-	ST-ZIP					<b> </b>
_	TLE		☐ D€LE	TE	4.1 TITLE					☐ Change	· Addition
N	AME				4. 2 NAME						
s	TREET ADDRESS				4.3 STREE	T ADDRES	s				
0	ITY-ST-ZIP				4.4 CITY-5	ST-ZIP				Change	Addition
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N	IAME				5.2 NAME						
5	TREET ADDRESS					T ADDRES	۱"				
L	CITY-ST-ZIP				5.4 CITY-3 6.1 TITLE	si-ZIP	<del> </del>			Change	Addition
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١	IAME				6.2 NAME	ET ADDRES	اء				•
1 .		l			D.J SIRE	~ \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	~				

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 of 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, of on any attachment with an address, with all other like empowered. CITY-ST-ZIP

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

**FILED** 

Feb 15, 1999 8:00 am Secretary of State

02-15-1999 90041 017 \*\*\*150.00