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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V33842

(8)

Mailing Address

DOGWATER CAFE II, INC.

Principal Place of Business

FILED
Apr 25 1997 8:00am
Secretary of State

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3611 W. HILLSI TAMPA FL 336			STE. A	7250 ULMERTON RD. STE. A LARGO FL 33771-4825							
								3. Date Incorporated or Qualified 05/05/1992		e of Last 3/1996	Report
2. Principal F	Place of Busine	ss	2a. Mailing Address	2a. Mailing Address 26			4, FEI Number 59-3125377		-	Applied For Not Applicable	
Sulte, Apt.	. #, etc.		Suite, Apt. #, et	Suite, Apt. #, etc.			5. Certificate of Status Desired	Desired \$8.75 Additional Fee Required			
City & Sta	te		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip 24	2	Zip <b>29</b>	30	Country 30			8. This corporation has liability for intaggible tax under s. 199.032, Florida Statutes Ves ☐ No				
	9. Name a	and Address of Curr	ent Registered Agent			_		10. Name and Address of New Ada	istered A	gent	
	ZDYK, JOHN				81	IJΝ	lame				
	PHILLIPS WA M HARBOR F			82 Street Address (P.O. Box Number is Not Acceptab			le)				
					83	3					
					84	C	ity		FL	85 Zip	Code
office or	registered ago	nt, or both, in the Sta	502 and 607.1508, Florida ite of Florida Such change igations of, Section 607.05	e was authori	zed b	y the	arned co e corpor	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of It the appo	changing intment a	its registered is registered
SIGNATURE	Signature, typed or	r printed name of registered	agent and title if applicable.	(NOTE: Begist	ered Ag	gent si	gnature req	uired when reinslating)	DATE		
12.		OFFICERS /	ND DIRECTORS	1	3.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	PRS IN 12
TITLE	P		☐ DELE	TE 1,	TITLE					Change	☐ Addition
NAME	DROZDYK, JOHN										1
STREET ADDRESS						T ADD	RESS				
CITY-ST-ZIP						\$1 - 2	Р				
TITLE						2.1 TITLE				Change	Addition
NAME	JOHNSON, BRIAN										
STREET ADDRESS	OAFFTY HADDOD PL OAGOE					TADD	·				
CITY-ST-ZIP	SAFETY HARBOR FL 34895						IP .			Change	Addition
TITLE	L DELETE 3174									Unango	Augmon Augmon
NAME OTREET ADDRESS					2 NAME 9 STREE		noree l				
STREET ADDRESS CITY-ST-ZIP					1. C(TY-		F				
TITLE	□ DELETE 4.11						"			Change	Addition
NAME				4	2 NAME	[					
STREET ADDRESS				43	STREE	ET ADO	DRESS				
CITY-ST-ZIP				4.	4 CITY-	ST-7	P				
TITLE			☐ DELE	TE 5	TITLE					Change	Addition
NAME				5.3	2 NAME						
STREET ADDRESS				5.	3 STREF	FT ADE	JRESS				
CITY-ST-ZIP					4 CITY-	S7 - ZI	P				
TITLE			☐ DELE	TE 6.	1 TITLE					Change	Addition
NAME				6.	2 NAME						
STREET ADDRESS				6.	3 STREE	T ADO	PRESS				
CITY-ST-ZIP	<u> </u>	<del></del>		6.	CITY-	S1-7		ad in Casting 110 07/2V// Florido Statuta			nt 4h a

I do 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 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.

3-31-9-