FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **828504** **(1)**

1. Corporation Name

CAROUSEL SNACK BARS OF MINNESOTA, INC.

Principal Place of Business	Mailing Address
9549 PENN AVE. SOUTH MINNEAPOLIS MN 55431	9549 PENN AVE. SOUTH MINNEAPOLIS MN 55431

3. Date Incorporated or Qualified: **08/16/1972**
3a. Date of Last Report: **02/06/1995**

4. FEI Number: **41-0905764** ☐ 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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 County	29 Zip / 30 County

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

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 607.1005, 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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	☐ DELETE	P/D	☒ Change ☐ Addition
NAME	LIEBERMAN, STEPHEN E		Lieberman, Stephen E.	
STREET ADDRESS	9549 PENN AVE. S.		9549 Penn Ave. S.	
CITY-ST-ZIP	MINNEAPOLIS MN		Minneapolis, MN 55431	
TITLE	D	☐ DELETE	T/D	☒ Change ☐ Addition
NAME	OKINOW, HAROLD		Okinow, Harold	
STREET ADDRESS	9549 PENN AVE. S.		9549 Penn Ave. S.	
CITY-ST-ZIP	MINNEAPOLIS MN		Minneapolis, MN 55431	
TITLE	D	☐ DELETE	S/D	☒ Change ☐ Addition
NAME	LIEBERMAN, DAVID		Lieberman, David	
STREET ADDRESS	9549 PENN AVE. S.		9549 Penn Ave. S.	
CITY-ST-ZIP	MINNEAPOLIS MN		Minneapolis, MN 55431	
TITLE	D	☒ DELETE	V	☐ Change ☒ Addition
NAME	LIEBERMAN, STEPHEN E.		Lederman, Harold	
STREET ADDRESS	9549 PENN AVE. S.		9549 Penn Ave. S.	
CITY-ST-ZIP	MINNEAPOLIS MN		Minneapolis, MN 55431	
TITLE		☐ DELETE		☐ Change ☐ Addition
NAME				
STREET ADDRESS				
CITY-ST-ZIP				
TITLE		☐ DELETE		☐ Change ☐ Addition
NAME				
STREET ADDRESS				
CITY-ST-ZIP				

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this report is true, accurate, and complete. I also certify that the information indicated on this annual report or supplement to 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 added above.

SIGNATURE: X Stephen E Lieberman — Stephen E. Lieberman — March 13, 1996 — 612-887-5399

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number