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

PROFIT
CORPORATION
ANNUAL REPORT
1999

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # F9400005851 OKV

FILED May 24, 1999 8:00 am Secretary of State

05-24-1999 90013 010 ***150.00

		001 01	12			
Brach & Brock Confections				* 5 6 283 - 90013 - 10 * * *		
Principal Place of Business Mailing Address						·
P.O. Boy	r 22427	P.O. Box 2	2427			
4120 3	Jersey Pike	Chattanooga	Tn.	DO NOT WRITE IN TH	IS SPACE	
Chatta	nooga Th.	Coucardogs	37421	3. Date Incorporated or Qualifed		
0, 200.00	31421		51101	11-14-94		
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Ap	plied For
26 P.O. Box 22			いそみつ	36-3484272	No	t Applicable
	Suite, Apt. #, etc. Suite, Apt. #, etc.				\$8.75	Additional
22		27		5. Certifcate of Status Desired	Fee Re	quired
City & State City & State				6. Election Campaign Financing	\$5.00	May Be
23 Za Chatanooga,			<u> 1n. </u>	Trust Fund Contribution	Added t	o Fees
Zip	Country	Zip	Country	8This.corporation owes the current year	ntangible —	
24	25	29 37421 3	30	Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Curren	: Registered Agent		10. Name and Address of New Registere	d Agent	
_			81 Name			
Prentic	ce-Hall Corporat	ion System, I	NC 82 Street Addr	ess (P.O. Box Number is Not Acceptable)		
	Hays Street		83			
Talla	hassee, FL 323	301	84 City	F	85 Zip C	Code
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State our familiar with, and accept the obligate	of Florida. Such change was auti	horized by the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its	registered gistered
SIGNATURE						
	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: R	Registered Agent signature required	d when reinstating) DATE		
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	DP	☐ DELETE	1.1 TITLE		☐ Change	☐ Addition
NAME	Al Buniak		1.2 NAME			
STREET ADDRESS	4120 Jersey Pik		13 STREET ADDRESS			
CITY-ST-ZIP	Chattanooga, Tr		1.4 CITY-ST-ZIP			
TITLE .	DS	☐ DELETE	2.1 TITLE		Change	☐ Addition
NAME	John norton		2.2 NAME			
STREET ADDRESS	401 M. Cicero Av	enue	2.3 STREET ADDRESS			
CITY-ST-ZIP	Chizago, IL 60	<u>644 </u>	2.4 CITY-ST-ZIP			
TITLE	OV	☐ DELETE	3 1 TITLE		☐ Change	☐ Addition
NAME	michael Ren		3.2 NAME			
STREET ADDRESS		· ســــــــــــــــــــــــــــــــــــ	3.3 STREET ADDRESS			
CITY-ST-ZIP	Chattanooga, Tr.	37491	34. CITY-ST-ZIP			
TITLE	D	☐ DELETE	4.1 TITLE		Change	Addition
NAME	Kevin Martin 4120 Jersey Pike		4. 2 NAME			
STREE #ADDRESS	4120 Jersey Pike	Onche i	4.3 STREET ADDRESS			
CITY-ST-ZIP	Chattanooga, Tri.	37421	4.4 CITY-ST-ZIP			
TITLE	_	☐ DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP		——————————————————————————————————————	5.4 CITY-ST-ZIP	<u> </u>		
TITLE		☐ DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP	<u> </u>		6.4 CITY-ST-ZIP	·		
indicated	on this annual report or supplemental.	annual report is true and accura	ite and that my signature	ection 119.07(3)(i), Florida Statutes. I further of shall have the same legal effect as if made un	der oath; that I	am an
Block 12	director of the corporation or the receiver Block 13 if changed, or on an attach	er or trustee empowered to exe ment with an address, with all o	ther like empowered.	ed by Chapter 607, Florida Statutes; and that	ту пате арре	ais III

AND TYPED COPPRINTED NAME OF SIGNING OFFICER OR DIRECTOR DIRECTOR