

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



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

DOCUMENT # J 28447

1. Corporation Name

CELEBRITY CHEESECAKE CORPORATION

Principal Place of Business

Mailing Address

**974 SOUTH STATE ROAD 7
MARGATE, FL. 33068**

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MARGATE, FL. 33068**

3. Date Incorporated or Qualified
AUGUST 13, 1986

3a. Date of Last Report
1996

2. Principal Place of Business

2a. Mailing Address

21 **974 SOUTH STATE ROAD 7**

26 **974 SOUTH STATE ROAD 7**

4. FEI Number

59-2707046

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

City & State

23 **MARGATE FL.**

City & State

28 **MARGATE, FL.**

Zip

24 **33068**

Country

25 **USA**

Zip

29 **33068**

Country

30 **USA**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**NINO DILORETO
16790 HARBOR CT.
FORT LAUDERDALE, FL 33326**

81 Name **SUSAN BERNSTEIN**

82 Street Address (P.O. Box Number is Not Acceptable)
1541 N.W. 105th AVE.

83

84 City **PLANTATION,**

FL

85 Zip Code
33322

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. Thereby accept the appointment as registered agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes

SIGNATURE **Susan J. Bernstein**

Signature, typed or printed name of registered agent and date of appointment

(NOTE: Registered Agent signature required when reinstating)

Date:

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PRESIDENT/TREASURER** ☒ DELETE
NAME **NINO DILORETO**
STREET ADDRESS **16790 HARBOR COURT**
CITY-ST-ZIP **FORT LAUDERDALE, FL. 33326**

TITLE **VICE PRESIDENT/SEC. R.** ☒ DELETE
NAME **SUSAN BERNSTEIN**
STREET ADDRESS **1541 N.W. 105th AVE.**
CITY-ST-ZIP **PLANTATION, FL. 33322**

TITLE ☐ DELETE
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TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

PRESIDENT, TREASURER ☒ Change ☐ Addition

SUSAN BERNSTEIN, D

1541 N.W. 105th AVE.

PLANTATION, FL. 33322

V/S/D

CLAUDIA I. DILORETO

16790 HARBOR COURT

FORT LAUDERDALE, FL. 33326

900001875689 ☐ Change ☐ Addition

-06/26/96--01013--037

*****61.25**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: **Susan J. Bernstein**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Susan J. Bernstein 6/17/96 954 974-3577

Date

Daytime Phone #

CR2E034 (3/96)