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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P93000062841 (0)

CULINARY CLASSICS, INC.

## FILED Apr 25 1997 8:00am Secretary of State



	l Business	Mailing Address			I TOUTING THE LITTLE CHILD BY THE PARTY OF THE			
OS EAST PINE A	NVE	P.O. BOX 593453	ME0					
ALANDO FL 3282	94	ORLANDO FL 328595 US	M33					
CONTROL LE SKOZ	17	00			3. Date Incorporated or Qualified		of Last R	leport
•					06/27/1993	04/26	3/1996	
. Principal Place	e of Business	2a. Mailing Address			4. FEI Number		Ar	oplied For
		26			59-3200542			ot Applicab
Suite, Apt. #, 6	etc	Suite, Apt. #, etc	<b>5</b> .		5. Certificate of Status Desired		·	Additional
		27					<del></del>	equired
City & State		<u>├</u> ──────────	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
	Compa	28	Countr		Trust Fund Contribution		<del></del>	
Zip	Country	Zip	30	y	This corporation has liability for Florida Statutes	Intangible ta		199.032,
	25   9. Name and Address of Co		1301		10. Name and Address of New R			
			81	Name		··· <del>·</del>		
LAWRENCE A, MOTZEL 1503 EAST PINE AVE.			<u> </u>		(DO D. A			
SUITE-			82	82 Street Address (P.O. Box Number is Not Accept				
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ONLAN	NOU FL DEGET		<u></u>	<b></b>			T-1-2	
			84	6 City		FL	85 Zip	Code
					poration submits this statement for the		<del>Ļ </del>	
GNATURE \$5	und se typed or printed habe of register	red agent and little if applicable	(NOTE: Registered A	gent signature requ	ired when reinstating)	DATE		
		S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF			RS IN 12
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1. 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; the lam are 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 3 if changed or in an attachment with an address.

SIGNATURE:

MANUAL MANUEL LAWRENCE AND INTERPRETED TO BE STORED THE STORE OF SIGNING OFFICER OF DIRECTOR

1/21/97 487 857-047