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. Mortham

Secretary of State

DIVISION OF CORPORATIONS

(8)

PART Principal Piace of Business Marting Address	NO ANCHOVIES ITALIAN RESTAURANT, INC.										
PALU BEACH FL 39410	Principal Piace	of Business	Mailing	Mailing Address				-			
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Supplementary Supplementar								,		•	
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27		f, etc		e, Apt. #, etc.						\$8.75 Additional	
20											
Zip			- ⊢— ´	& State				_		' '	
Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 150, State Andress (P.O. Box Number is Not Acceptable)		Country			Соц	intry			ntangible		
### CHARLES R.L. \$35 EAST INDIANTOWN ROAD JUPITER FL 33477 ### 22 Street Andrees (PO Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607-0502 and 607-1508. Florida Statutes, the depression and compression submits this statement for the purpose of charaging its projected agent on both, and de State of Florida Statutes, the depression about the purpose of charaging its projected agent than the state of Florida Statutes, the depression and of circlosis Indiana Statutes and the purpose of charaging its projected agent than the state of Florida Statutes and the comportation submits this statement for the purpose of charaging its projected agent than the state of Florida Statutes and the comportation submits this statement for the purpose of charaging its projected agent than the statement and accept the obligations of Section 607 6056, Florida Statutes and the purpose of charaging its projected agent than the statement of the purpose of charaging its projected agent than the statement of the purpose of charaging its projected agent and the statement of the purpose of charaging its projected agent than the statement of the purpose of charaging its projected agent and the statement of characines and the purpose of charaging its projected agent than the statement of characines and the purpose of charaging its projected agent and the statement of characines and the purpose of charaging its projected agent and the statement of characines and the purpose of charaging its projected agent and the statement of characines and the purpose of charaging its projected agent and the statement of characines and the purpose of charaging its projected agent and the statement of characines and the purpose of charaging its projected agent and the statement of characines and the purpose of characines and the purpose of charaging its projected agent and the statement of characines and the purpose of characines and the purp	24	25	29		30					<u></u>	
######################################		9. Name and Address of Current	Registered	l Agent				10. Name and Address of New Re	gistered /	Agent	
Section Sect	WHI	TE, CHARLES R.L.				וש	Name				
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Stanles, the above named corporation storat of directors. I horsely accept the approximate as registered agent, or both, or the State of Florida Such change was authorized by the corporation's board of directors. I horsely accept the approximate as registered agent and familiar with and accept the obligations of Section 607 0505. Florida Stanles. SIGNATURE SIGNATURE SIGNATURE DELETE DELETE DELETE 11 THILE DELETE 12 THILE DELETE 14 CHY ST- 2PP THE DELETE 31 THILE 32 NAME 32 NAME 33 NAME 31 STREET ADDRESS CHY ST- 2PP THE DELETE 31 THILE 31 THILE 31 THILE 32 NAME 33 NAME 34 STREET ADDRESS CHY ST- 2PP THE DELETE 34 CHY ST-							Street Add	ss (P.O. Box Number is Noi Acceptable)			
Pursuant to the provision; of Sections 607 0502 and 607 1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent and named with, and escaped the obligations of Soction 607 0505, Florida Statutes	JUP	ITER FL 33477				83					
Pursuant to the provision; of Sections 607 0502 and 607 1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent and named with, and escaped the obligations of Soction 607 0505, Florida Statutes										T	
office or registred agent, or betty, in the State of Florida, Such change was authorized by the components broated of orectors. Indirety accidit the appointment as registred agent and the larges after the properties. Signature Si						84	City		FL	85 Zip Gode	
12	office or re	edistered agent, or both, in the State o	of Florida, Si	ich change was	s authorized	i bvi	the corporati	oration submits this statement for the po on's board of directors. I hereby accept	irpose of the appo	changing its registered intrient as registered	
12.	SIGNATURE	6	d and the Land	e abita (b	Oli fic weeks	at Ame	et som at no recon	end when remotitional	FIATE		
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4. If do nereby certify that the information steps but with its lining is voluntarily unliked annual report is true and accurate and that the information indicated on his archital report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it 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:

GUARGRE AND TYPED OR PRINTED NAME OF SIGNARD OFFICER OR DIRECTOR

561-621-2662