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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(9)

33 FLAVORS OF FLORIDA, INC.

FILED Mar 04 1998 8:00am Secretary of State

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Orinainal Diago	of Business	Mailing Address				
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8900 FIRST FLORIDA BANK BLDG 1800 SECOND STREET SARASOTA FL 34238		8900 FIRST FLORIDA BAN 1800 SECOND STREET	AK ELDG			
		SARASOTA FL 34236		DO NOT WRITE IN	THIS SPACE	
				3. Date Incorporated or Qualified		
				08/22/1968		
	ace of Business	2a. Mailing Address	1 1 4	4. FEI Number		plied For
21 /800	second st.	26 1800 Secon	d DT.	59-1219421		t Applicable
Suite, Apt	uite 890	Suite, Apt. #, etc.	Q6A	5. Certificate of Status Desired	3 8.75 / Fee Re	
22 City & State		City & State	090	A 511		
23 Saras	1/4 41	28 Sarasota,	14	6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added 1	
ZiD	Country	Zip	Cogntry	8. This corporation owes or has paid t		
20 3422	36 25 Sarasala	2///-/	30 Sarasda	Personal Property Tax due June 30] No
= -1 =/ 7 6 /2	9. Name and Address of Curre		55 2 100 100 100	10. Name and Address of New Regis		
.00	VG, WESTON E.		81 Name			
	1ST FLORIDA BANK BLDG		90 8000 4 4 4	tors (D.O. Bou Musches in Mat Assessable)		
	O SECOND ST		82 Street Add	Iress (P.O. Box Number is Not Acceptable)		
	RASOTA FL 34236		83			
	0.000		24 00		1-1	S. J.
			84 City		FL 85 Zip	Code
11. Pursuant I	o the provisions of Sections 607.05	502 and 607.1508, Florida Statute	es, the above-named corp	poration submits this statement for the purp	ose of changing it	s registered
office or re	agistered agent, or both, in the Sta	te of Florida. Such change was a grations of Section 607,0505, Flo	uthorized by the corpora	ition's board of directors. I hereby accept the	ne appointment as	registered
ດຽງອາແ. ເພ	in lamiliar with, and accept the con	gations of, dection contocos, i to	inda Otatatos.			
-						
SIGNATURE	Signature, typed or printed name of registered a	agent and little if applicable (NOTE	: Registered Agent signatura requi	ired when reinstaling)	DATE	
SIGNATURE		againt and lifle if applicable (NOTE ND DIRECTORS	Registered Agent signatura requi	ried when reinstating) ADDITIONS/CHANGES TO OFFICER		IS IN 12
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