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PROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 567904

(8)

DELICES-DE-PARIS, INC.

FILED
May 14 1998 8:00am
Secretary of State



Principal Place of Business Mailing Address 644 N. GRANDVIEW AVENUE 644 N. GRANDVIEW AVENUE DAYTONA BEACH FL 32118-3821 DAYTONA BEACH FL 32118-3821 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/06/1978 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 59-1833352 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes ☐ No 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent 81 SIGERSON, DAVID K., ESQ. 142 E. GRANADA BLVD. Street Address (P.O. Box Number is Not Acceptable) ORMOND BCH FL 32074 83 Zip Code 84 City 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 Horida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and rate if applicable (NOTE: Registered Agent signature required when reinstating) RZE034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE SALVAT, JEAN PAUL NAME 1.2 NAME 644 N. GRANDVIEW AVE. STREET ADDRESS 1.3 STREET ADDRESS DAYTONA BEACH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE SALVAT, NICOLE 2.2 NAME 644 N. GRANDVIEW AVE. STREET ADDRESS 2.3 STREET ADDRESS DAYTONA BEACH FL CITY-ST-ZIP 2 4 CHY-ST-ZIP TITLE DELETE 3.1 TITLE Change ☐ Addition NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS CITY-ST-ZIP 8.4. CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CiTY - ST - 7)P CITY-ST-ZIP

14. Thereby 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 supplemental agruest report is true and acquirate 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 received or trustice empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.