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FILED
Apr 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F95000003370 (2)

1. Corporation Name

ALL SAINT'S BRANDS, INC.



Principal Place of Business

201 MAIN STREET, S.E.
SUITE 212
MINNEAPOLIS MN 55414

Mailing Address

201 MAIN STREET, S.E.
SUITE 212
MINNEAPOLIS MN 55414

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/13/1995

4. FEI Number

41-1771135

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

2. Principal Place of Business

21 Suite, Apt #, etc

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

SCHWARTZ, NATHAN
7000 NORTH FEDERAL HIGHWAY
BOCA RATON FL 33487

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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. 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 title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PVD
NAME JOHNSON, SCOTT
STREET ADDRESS 121 MALCOLM AVE, S.E.
CITY-ST-ZIP MINNEAPOLIS MN

TITLE C
NAME BENSON, SCOTT
STREET ADDRESS 5432 PARK AVE S.
CITY-ST-ZIP MINNEAPOLIS MN

TITLE STD
NAME BENSON, SCOTT
STREET ADDRESS 5432 PARK AVENUE SOUTH
CITY-ST-ZIP MINNEAPOLIS MN

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PVD
1.2 NAME Johnson, Scott
1.3 STREET ADDRESS 104 Malcolm Ave SE
1.4 CITY-ST-ZIP minneapolis MN

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS

14. I 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:



4/1/98

102-375-7820

CR2E034 (10/97)