## 2-11-98 15 1913 NC FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Feb 11 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600001226 (7)

SAVANNAH SWEETS, INC.							
						. <b>10</b> 000 <b>10</b> 00 1000 1000 1100 <b>1</b> 000	
Principal Plac	ce of Business	Mailing Address				<b>  10</b>        <b>  11  </b>	
B1 ST. GEORGE ST B1 ST. GEORGE ST							
ST. AUGUSTINE FL 32084 ST. AUGUSTINE FL 3208			4		DO NOT WRITE IN THIS SPACE		
00		US			3. Date Incorporated or Qualified	THE OTTOL	
					03/11/1996		
	Place of Business	2a. Mailing Address			4. FEI Number	Applied For	
Suite, Apt.	# elc	Suite, Apt. #, etc.			58-1479917	Not Applicable	
22 27		h			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28				Added to Fees	
Zip	Country	Zip	Country		8. This corporation owes or has paid		
24	25 Same and Address of Curre		30		Personal Property Tax due June 3 10. Name and Address of New Regi		
NAC		The ground and and	81 No	ame	10. Hame and Address of New York	stolen Whelit	
MEYERS, H. KEVIN 81 ST. GEORGE STREET			<b>82</b> St	root Addroi	ss (P.O. Box Number is Not Acceptable	<u> </u>	
ST. AUGUSTINE FL 32084				reer Audres	ss (i .o. box Number is Not Acceptable	<b>,</b>	
			83				
			<b>84</b> Ci	ty		FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or both, in the State of Florida, Such change was auti				med corpor	ration submits this statement for the pur		
office or r agent. I a	registered agent, or both, in the Stati im familiar with, and accept the oblig	e of Florida. Such change was a gations of, Section 607.0505, Flo	uthorized by the rida Statutes.	corporation	n's board of directors. I hereby accept	the appointment as registered	
SIGNATURE							
12.	Signature, typed or printed name of registered ag OFFICERS AN	pent and title it applicable. (NOTE ND DIRECTORS	: Registered Agent sig	nature required		DATE	
TITLE	P	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICE	Change Addition	
NAME	MEYERS, H. KEVIN		1.2 NAME			• -	
STREET ADDRESS	108 FULL MOON LANE		1.3 STREET ADDR	RESS			
CITY-ST-ZIP	SAVANNAH GA		1.4 CITY - ST - ZIP				
TITLE	8	☐ DELETE	2.1 TITLE			Change Addition	
NAME	MEYERS, HERMAN O		2.2 NAME	Ì			
STREET ADDRESS	507 MOON RIVER COURT		2.3 STREET ADDR	1			
CITY-ST-ZIP TITLE	SAVANNAH GA 31406	DELETE	2.4 CITY-ST-ZIF 3.1 TITLE	·		Change Addition	
NAME			3.2 NAME			CHANGE LI MODITION	
STREET ADDRESS			3.3 STREET ADDR	ESS			
CITY-ST-ZIP			3.4. CITY - ST - ZIP				
TITLE		DELETE	4.1 TITLE			Change Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDR	fss			
CITY-ST-ZIP		V-1	4.4 CITY - ST - ZIP				
TITLE		☐ DELETE	. 511ITLE			Change Addition	
NAME			5.2 NAME	Ì			
STREET ADDRESS			5.3 STREET ADDR	ESS			
CITY-ST-ZIP	·		5.4 CITY - ST - ZIP				
TITLE		☐ DELETE	6.1 TITLE			Change Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADORE	ESS			

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.