## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 11 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	MENT # G0996 Is bagel place, inc.	3 (1)			## ### ### ### ### ###
Principal Place of Business  ** JUVENCIO PEREIRA 2849 HOLLYWOOD BLYD. HOLLYWOOD FL 33020-4840		Mailing Address  * JUVENCIO PEREIRA 2649 HOLLYWOOD BLVD. HOLLYWOOD FL 33020-4840			
					Date of Last Report )7/08/1996
2. Principal Pr	race of Business	2a. Mailing Address		4. FEI Number 59-2238504	Applied For Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	0	City & State			Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
7μ 24	Country 25	Ζ(p	Country 30	8. This corporation has liability for intanging Florida Statutes	ible tax under s. 199.032,
	9. Name and Address of Curre		81 Name	10. Name and Address of New Register	
	PEREIRA JUVENCIO				
	HOLLYWOOD BLVD.		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
HUL	LYWOOD FL 33020		83		
			84 City	F	Zip Code
agent Lar SIGNATURE	m familiar with, and accept the obli	igations of, Section 607.0505, F	lorida Statutes.	poration submits this statement for the purpos tion's board of directors. I hereby accept the	appointment as registered
12.	Stand or transfer period cannot be easily and of beginning a OFFICERS A	ND DIRECTORS (NO	13,	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
THE	VPD	DELETE	1.1 TITLE		Change Addition
NAME	PEREIRA, JUVENCIO 2649 HOLLYWOOD BLVD.		1.2 NAME		
STREET ADDRESS	HOLLYWOOD FL		1.3 STREET ADDRESS		
CITY-S1-ZH THLE		DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ACORESS			2.3 STREET ADDRESS	• .	
CHY-ST 7IP	· · · · · · · · · · · · · · · · · · ·		2. 4 CITY - ST - ZIP		
TITLE		DÉLETE	- 3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
THEE		☐ DELETE	3.4. CITY+ST+ZIP 4.1 TITLE		Change Addition
NAME		_	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CHY - \$1 - 20°			4.4 CITY-ST-ZIP		
MILE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
DITY-S1-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME		had been -	62 NAME		Print Assessment Communication
STREET ADDRESS			63 STREET ADDRESS		
Dity-St-72			6.4 CITY+ST-ZIP		
14. I do heret	by certify that the information suppl	ied with this filing does not qua	lify for the exemption stated	d in Section 119.07(3)(i), Florida Statutes. I ful It my signature shall have the same legal effec	rther certify that the
I am an ol	flicer or director of the corporation in Block 12 or Block 13 if changed,	or the receiver or trustee empo-	wered to execute this repo	ort as required by Chapter 607, Florida Statute	s; and that my name