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

PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

G43540

(5)

MISSOURI DONUTS, INC.

May 04 1998 8:00am
Secretary of State

Change

Change

___ Addition

Addition

EII ED

Principal Place of Business Mailing Address									
600 S MISSOURI AVE CLEARWATER FL 33516				600 S MISSOURI AVE CLEARWATER FL 33516				DO NOT WRITE IN THIS SPACE	
								3. Date Incorporated or Qualified 06/14/1983	
2. Principal Place of Business				2a. Mailing Address				4. FEI Number Applied For	
21				26				05-0425180 Not Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional	
City & State				City & State				Fee Required	
· · · · · · · · · · · · · · · · · · ·								6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip Country				Zip Country			,	8. This corporation owes or has paid the current year intangible	
24	25 29 30			J.J ,		Personal Property Tax due June 30. Yes No			
	g. Name	and Address of Cur		stered Agent	1001	1		10. Name and Address of New Registered Agent	
BOTELHO, NORBERTO S.						81	Name		
2133 COLLINSWOOD CT						82	Street Addr	ress (P.O. Box Number is Not Acceptable)	
NEW PORT RICHEY FL						Ĺ			
						83			
						84	City	85 Zip Code	
							L	FL s z p 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 proted name of registered ag							ent signature requir		
				D DIRECTORS 13. DELETE 1.1 TE				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
TITLE	BOTELHO, NORBERTO S.					TITLE	1	Criange Aboution	

ALTIN BOOK BIGHTY EL							ADDRESS		
CITY-ST-ZIP	STD				CITY-S	ST - ZIP	Change Addition		
NAME	The state of the s					NAME		C Ondrigo C Toodigot	
STREET ADDRESS 2133 COLUNSWOOD CT.					2.3 STREET ADDRES		ADDOCCC		
CITY-ST-ZIP NEW PORT RICHEY FL				a			- 1		
TITLE	DEL					2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition	
NAME						NAME			
STREET ADORESS							ADDRESS		
CITY-ST-ZIP					- 1	CITY-			
TITLE	 			DELETE		TITLE	VI 211	☐ Change ☐ Addition	
NAME					4. 2	2 NAME		• •	
STREET ADDRESS					4.3	STREET	ADDRESS		
CITY-ST-ZIP					4.4	CITY-S	67 - Ž IP		

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 of the receiver 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 chapped, of on an attachment with an address.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS 5.4 CITY-S1-ZIP

6.3 STREET ADDRESS

CICALATUDE.

TITLE

NAME

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

Sollto

DELETE

DELETÉ