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 #

(9)

FILED Apr 23 1998 8:00am Secretary of State

TOUJAY'S BAKERY & COMMISSARY, INC.												
TOOJAY'S BAKERY & COMMISSARY, INC. 🖰												
Principal Place of Business Mailing Address									(A) (III) (18) (
3654 GEORGIA AVENUE 3654 GEORGIA AVENUE												
WEST PALM BEACH FL 33405 WEST PALM BEACH FL 33405												
US		US					1			THIS SPACE	Ē	
								 Date Incorporated or Quali 07/06/1983 	Hed			
2. Principal P	Place of Business	28. M	ailing Address					4. FEI Number			ΙAn	plied For
21		26	g					59-2307016		Ì		Applicable
Suite, Apt.	#, etc.	Si	iite, Apt. #, etc.					5. Certificate of Status Desired	d [¬ \$8	3.75 A	Additional
22		27						b. Certificate of Status Desire	<u> </u>	<u> </u>	Fee Re	quired
City & Stat	e	ļ	ty & State				ļ	6. Election Campaign Financi	ng _			Мау Ве
23 Zip	Country	28		Col	ıntrv	,		Trust Fund Contribution	<u>L</u>		Added to	
24				30	Country			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
J	9. Name and Address of Curr		ed Agent	[30]	Γ_			10. Name and Address of Ne				
BR	ROWN, JAY A.				81	Name						
3654 GEORGIA AVENUE					82	Street A	Addres	ss (P.O. Box Number is Not Acc	eptable)			
W.	PALM BEACH FL 33405					ļ						
					83							
ب					84	1				FL 85	1 '	
11. Pursuant	to the provisions of Sections 607.05 registered agent, or both, in the Sta im familiar with, and accept the obt	502 and 607.	1508, Florida Statul	tes, the al	bove	e-named	corpor	ation submits this statement for	the purp	ose of chan	ging its	registered
agent. I a	im familiar with, and accept the obli	igations of, S	ection 607.0505, FI	orida Stat	tutes	s.	oration	13 DOLIG OF WILCOIDS. THEFODY	recept in	10 appointm	CHIL CIST	ogistored
SIGNATURE	Signature, typod or printed name of registering	and and State	(MC)	f Desistan	d 4			when reinstaling)	 ,	DATE		
12.		ND DIRECTO		13.	a Age	en egnature	required	ADDITIONS/CHANGES TO (CTOR	S IN 12
TITLE	PTD		DELETE	1.1 TI	TLE		/P			□ c		X Addition
NAME	BROWN, JAY A.			1.2 N/	AME			LIAM D. KORENB				
STREET ADDRESS	3654 GEORGIA AVENUE			1.3 ST	TREET	ADDRESS	365	4 GEORGIA AVEN	UE			
CITY-ST-ZIP	W. PALM BEACH FL					it-ZIP	WES	T PALY BEACH.	FL_	<u> 33405</u>		
TITLE	VSD Katzenberg, Marc J, III		L DELETE	2.1 Ti							hange	Addition
NAME	3654 GEORGIA AVENUE			2.2 N/		- 1						
STREET ADDRESS	W. PALM BEACH FL					ADDRESS						
CITY-ST-ZIP TITLE	W. I ADM DEROTTE		DELETE	2 4 C		ST-ZIP				□ c	hanne	Addition
NAME			C) Officia	3.1 N		ł				۰ سا	напус	L ROUNON
STREET ADDRESS				- 6		ADDRESS						1
CITY-ST-ZIP						ST-ZIP						
TITLE			DELETE	4.1 11		31-211					hange	Addition
NAME				4, 2 N	AME	1					-	
STREET ADDRESS				4.3 \$1	TREET	ADDRESS						
CITY-ST-ZIP				4.4 CI	ITY-S	ST-ZIP						
TITLE			DELETE	5 1 TI				8000024	150	24 16	hange	Addition
NAME				52 N/	AMÉ	ĺ		900002 4 -04/24/980	$10\overline{19}$	033		İ
STREET ADDRESS				5.3 ST	REFT	ADDRESS		***150.00				
CITY-ST-ZIP				5.4 CI	TY-S	ST-ZIP						
TITLE			DELETE	6 1 TI	TLE					☐ CI	nange	Addition
NAME				6.2 NA	AME						Ų,	ک ا
STREET ADORESS				6.3 \$1	TREET	ADDRESS					•	$\omega \cdot \mathcal{V}$ 3

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:

(561) 659-9011