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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # G94202

(0)

FILED May 12 1997 8:00am Secretary of State

1. Corporation Name DOUGH BOYS OF SOUTH FLORIDA, INC. Principal Place of Business Mailing Address 829 S.E. 17TH ST. CAUSEWAY FT. LAUDERDALE FL FT. LAUDERDALE FL ST. LAUDERDALE FL ST. LAUDERDALE FL ST. LAUDERDALE FL												
								Date Incorporated or Qua 04/02/1984		Date of La		ort
~n	lace of Business		2a. Mailing Add	dress			4.	FEI Number				ed For
Suite, Apt	Suite, Apt #. etc.		Suite, Apt. #, etc.			59-2382070		\$8.7	Not Applicable 8.75 Additional			
2			27				6.	Certificate of Status Desire	ed 🗆		e Requ	
City & Stat	¢.		City & State	•			- 1	Election Campaign Financ			00 Ma	
2 ip	Count	TV	Zip		Countr		-	Trust Fund Contribution			ded to f	
	25	· y	29	Ì	30	,		This corporation has liabili Florida Statutes	Yes	No	ers. R	99.032,
	9, Name and Addr	ess of Current I						Name and Address of N	ew Register	red Agent		
GREENFIELD, RANDY					81	Name						
	S.E. 17TH STREET				82	Street Add	dress (P	O. Box Number is Not Acc	ceptable)		············	
FT.	LAUDERDALE FL 33	316			83	 						
					į 84	[City				<u></u> 85	Zip Co	de
	to the provisions of Selegistered agent, or bo im familiar with, and ac	ctions 607.0502 Ih, in the State of cept the obligati	and 607,1508, Flo f Florida. Such cha ions of, Section 60	rida Statute ange was a 7.0505, Flo	es, the above otherized be orida Statute	ve-named cor by the corpora es.	rporation ation's b	n submits this statement fo oard of directors. I hereby	or the purpose accept the	se of changi appointmen	ng its re	egistered gistered
SIGNATURE	Signature, typed or printed har		and title if applicable	(NOTE	Rogislered Ag	gent signature (equ	uired when	·	DAT	IE AND DIREC	TORS I	IN 12
SIGNATURE 12. TITLE	Signature Typed or profod nav	ne of registered agent OFFICERS AND	and title if applicable		Registered Ag	gent signature tequ	uired when	reinstating)	DAT	TE	TORS I	
SIGNATURE 12. TITLE NAME	PTD GREENFIELD, RA	ne of registered agent. OFFICERS AND	and title if applicable	(NOTE	13. 1.1 TITLE	geni signature tequ	uired when	reinstating)	DAT	IE AND DIREC	TORS I	IN 12
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4. I do hereby certify that the information supplied with this filing does not qualify for the exemption stared 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

SIGNATURE AND TIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GNERNFIELD 425-17

Daytime Phone #