

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 JUL 28 AM 7:34

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # H35957

(0)

1. Corporation Name

MRS. MAC'S KITCHEN, INC.

Principal Place of Business

2035 53RD AVE.
1006 EASTER LILY LANE
VERO BEACH FL 32966
US

Mailing Address

2035 53RD AVENUE
VERO BEACH FL 32966
US

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

12/31/1984

3a. Date of Last Report

04/28/1994

4. FBI Number

59-2476048

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

Zip

Country

6416 5th Street

Vero Beach, FL

32968

USA

9. Name and Address of Current Registered Agent

MACFARLAND, JEFF D.
2035 53RD AVENUE
VERO BEACH FL 32966

10. Name and Address of New Registered Agent

81 Name

Jeff D. MacFarland

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

Vero Beach

85 Zip Code

FL 32968

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 required in printed name of registered agent and in applicable)

(Signature required in printed name of registered agent and in applicable)

(Signature required in printed name of registered agent and in applicable)

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

D
MACFARLAND, JEFF D.
2035 53RD AVENUE
VERO BEACH FL

13.

ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY, ST, ZIP

D
MACFARLAND, JEFF D.
6416 5th Street
Vero Beach, FL 32968

☒ Change ☐ Addition

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY, ST, ZIP

☐ Change ☐ Addition

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

☐ Change ☐ Addition

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY, ST, ZIP

☐ Change ☐ Addition

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY, ST, ZIP

☐ Change ☐ Addition

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY, ST, ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 in an attachment with an address.

SIGNATURE:

(Signature and typed or printed name of signing officer or director)

Jeff D. MacFarland 7-24-95 407-569-4923

(Date)

(Telephone Number)

CP2E034 (3/95)