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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H64152

(2)

GIORGIOS ITALIAN DELI, INC.

Principal Place of Business

Mailing Address

132 W, MONTERY ROAD STUART FL 34994-4610

132 W. MONTERY ROAD STUART FL 34994

FILED Apr 21 1997 8:00am Secretary of State



								- [3. Date Incorporated or Qualifi		ate of Last F	leport	
						06/27/1985	04/	22/1996					
2. Principal Place of Business			├ ─┐	2a. Mailing Address				i	4. FEI Number			oplied For	
21			26									ot Applicable	
Sulte, Apt.		27 S	Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75 Additional Fee Required			
City & State	е		C	City & State					6. Election Campaign Financing \$5.00 May Be				
23		28	28					Trust Fund Contribution					
Zip		Col	Country			8. This corporation has liability for intangible tax under s. 199.032,							
24	25 29 3					30			Florida Statutes Yes No				
9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent						
GIORGIO, PAUL							Name						
843 SW WILLOW LANE						82 Street Address (P.O. Box Number is Not Acceptable)							
PALM CITY FL 34990							82 Street Address (P.O. Box Number is Not Acceptable)						
	0111112011					83				····			
					84	City			FL	85 Zip	Code		
11 Puration	to the provisions	of Sections 607 Of	02 and 607	1508 Florida Sir	alute the e	L	n-named	corner	ation enhants this etatement for t			te registered	
office or r	registered agent	, or both, in the Sta	te of Florida	Such change w	as authorize	d by	the corp	oration	ation submits this statement for to's board of directors. I hereby a	cept the app	pointment as	registered	
agent. I a	ım familiar with, a	and accept the obl	gations of, S	Section 607.0505.	, Florida Sta	tutes	3.						
SIGNATURE	Principal Maderna Control of the Control								A				
40	Signature, typed or p	rinted name of registered a OFFICERS A			NOH : Ragistere	ed Age	nt signature	required	whon reinstating) ADDITIONS/CHANGES TO O	DATE ECICEDS ANI	DIDECTOR	20 141 20	
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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 algebra of the provided statutes.

CICMATURE.

WILL THE HULL

4-15-97 (56) 287-55%