

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # J22328 (5)

1. Corporation Name

HARTFORD CAFE, INC.



Principal Place of Business

2301 MAITLAND CENTER  
SUITE 124  
MAITLAND FL 32751

Mailing Address

2301 MAITLAND CENTER  
SUITE 124  
MAITLAND FL 32751

3. Date Incorporated or Qualified  
07/03/1986

3a. Date of Last Report  
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 c/o Warren R. Caplan  
Suite, Apt. #, etc.

26 c/o Warren R. Caplan  
Suite, Apt. #, etc.

4. FEI Number  
59-2689994

Applied For  
Not Applicable

22 851 Trafalgar Ct.

27 851 Trafalgar Ct.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

City & State

City & State

23 Maitland FL

28 Maitland FL

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

Zip Country

Zip Country

24 32751-4132 25

29 32751-4132 30

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CAPLAN, WARREN R.  
2301 MAITLAND CENTER PARKWAY  
SUITE 124  
MAITLAND FL 32751

81 Name

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

851 Trafalgar Ct.

83

84 City

Maitland

FL

85 Zip Code  
32751

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 printed (Name of registered agent and new registered agent)

(If the Registered Agent's Signature is required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME P  
CAPLAN, WARREN R.  
STREET ADDRESS  
2301 MAITLAND CENTER PARKWAY  
CITY-ST-ZIP MAITLAND FL ☐ DELETE

1.1 TITLE  
1.2 NAME P  
CAPLAN, WARREN R.  
1.3 STREET ADDRESS  
851 TRAFALGAR CT.  
1.4 CITY-ST-ZIP MAITLAND FL 32751 ☒ Change ☐ Add on

TITLE  
NAME ☐ DELETE  
STREET ADDRESS  
CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME ☐ DELETE  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME ☐ DELETE  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME ☐ DELETE  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME ☐ DELETE  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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 on an attachment with an address.

SIGNATURE: *Warren R. Caplan*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/96 (407) 660-2511

Display Phone #

CR2E034 (12/95)