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 # J26579

(9)

SARASOTA COOKIE COMPANY, INC.

FILED
Mar 27 1997 8:00am
Secretary of State

Principal Place of Business Mailing Address									I CHRISTER MITM ALBERT MICHI MILLE INDIA	(1 AIBI) AIAII	ALBIT BSASI BIBIT A	
3121 57 AVE C	R EAST		21 57 AVE OR EAST	71,711= 311 11111								
P.O. BOX 15 P.O. BOX 15 ONECO FL 34264 O015												
UNEGO FL 342	04		OI!	ILOU I L BIRDIOUIS				3.	Date Incorporated or Qualified	3a. [Date of Last Re	eport
									07/31/1986		/04/1996	
2. Principal P	lace of Busin	ess	2a	Mailing Address					FEI Number	7.7		plied For
21			26	-					59-2697025		·····	t Applicable
Suite, Apt	#, etc			Suite, Apt. #, etc.					Configuration of Photos Provided		\$8.75	Additional
22			27						. Certificate of Status Desired	<u></u>	Fee Re	quired
City & State	е			City & State				6.	. Election Campaign Financing		\$5.00	May Be
23			28						Trust Fund Contribution		Added t	o Fees
Zip		Country	<u> </u>	Zip		Country	,	8.	. This corporation has liability for			199.032,
24	25 9. Name and Address of Current			9 30				Florida Statutes Yes No 10. Name and Address of New Registered Agent				
			of Current Regi	stered Agent		81	Nama	10.	. Name and Address of New F	egistered	I Agent	
	JAMS, LARI					01	Name					
	57 AVE C			82 S			Street A	ddress (l	P.O. Box Number is Not Accept	able)		
BRAI	denton fl	. 34203				83						
						03						
						84	City			C I	85 Zip (Code
			007.000	007 4500 Flydda Dia					an automita this statement for the	FL	el abanaina il	a vaciatore d
office or r	to the provisi registered ag	ons or sections ent, or both, in	the State of Flor	ida. Such change was	authoi	rized by	the corpo	oration's	on submits this statement for the board of directors. I hereby acc	ept the ap	pointment as	registered
agent. La	ım familiar wit	th, and accept	the obligations c	of, Section 607.0505, F	lorida	Statutes	S.					
SIGNATURE	Ter 1.00 4.1.17		rgistered agent and bit	desciones AIO	TC. Oani	abored And	ent signature n	on lead ut-c	-n rainetalant	DATE		
12.	ergoniare, typest		CERS AND DIRE			13.	ant erginatura n		ADDITIONS/CHANGES TO OFF		D DIRECTOR	S IN 12
TITLE	PST		21.12.17.12.21.12	DELETE		I.1 TITLE	· · · I				Change	Addition
NAME.		, LARRY G.				2 NAME						
STREET ADDRESS	3121 57 A				1	I 3 STREET	ADDRESS					
CITY-\$1-7IP	BRADENT				ı,	I.4 CITY - S	ST-ZIP					
1:ULE				☐ DELETE	2	1 TITLE					Change	Addition
NAME					2	2 NAME			•			
STREET ACIDRESS					2	2 3 STREET	ADDRESS					
CIEY - ST - ZiF					2	2 4 CITY-1	ST-ZIP					
TITLE				DELETE	13	9.1 TITLE			:		Change	Addition
NAMC	!				3	3.2 NAME						
STREET ADDRESS	1				3	9.3 STREET	ADDRESS					
CHTY-ST-ZIP	! 				3	9.4. CITY-	ST-ZIP		<u> </u>			
TITLE				☐ DELETE	[[4.1 TITLE					☐ Change	Addition Addition
NAME					_ [·	1. 2 NAME						
STREET ADERESS					! '	4.3 STREET	T ADDRESS					
CITY - S1 - ZIP				The sec		1.4 CITY - S	ST-ZIP			··	17 A	
TITLE				☐ DELETE		5.1 TITLE					Change	Addition
NAME:						5.2 NAME						
STREET ADDRESS					!	5.3 STREET	T ADDRESS					
CITY+ST-ZIP	ļ			1 52.22		5.4 CITY - S	ST-ZIP					A July
THLE				☐ DELETE		6.1 TITLE	ļ				Change	Addition
NAM:					1	62 NAME						
STREET ADDRESS					- 1	B 3 STAEE I	ADDRESS					

14. Lob 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 tiern 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.

6.4 CITY-ST-ZIP

SIGNATURE!

CHY-ST-ZIP

24/86 (941) 755-8371