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

PROFIT CORPORATION ANNUAL REPORT

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(2)

CLASSIC DESSERTS, INC.

## **FILED** Feb 03 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						ABA BUBUK BEBIK BUBUK BUBUK BI	## EMM   1401
12008 HWY. 574 12008 HWY. 574							
SUITE 6 SUITE 6 SUITE 6 SEFFNER FL 33584 SEFFNER FL 33584					DO NOT WRITE IN THIS SPACE		
SEFFNER FL 33584 SEFFNER FL 33584					3. Date Incorporated or Qualified		
					08/18/1986		
Principal Place of Business     2a. Mailing Address					4. FEI Number	I A	pplied For
21 26					59-2716659	N	lot Applicable
Suite, Apt. #, etc. Suite, Apt. #,					5. Certificate of Status Desired		Additional
22   : City & State		City & State	27     City & State		<del></del>	<del></del>	lequired
23		<del></del>	28		Election Campaign Financing     Trust Fund Contribution		May Be to Fees
Zip			Cour	ntry	This corporation owes or has paid the current year Intangible		
24	25 29 30		30		Personal Property Tax due June 30.  Yes No		
9. Name and Address of Current Registered Agent					10. Name and Address of New Ro	egistered Agent	
1	ALKER, DENNIS		;	81 Name			
	008 HWY. 574		82 Street Add		ess (P.O. Box Number is Not Accepta	ble)	
SUITE 6			ļ.,	83			
) SE	FFNER FL 33584			8			
			1	84 City		FL 85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was authorized agent. I amy familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				ove-named corp	oration submits this statement for the	purpose of changing i	ts registered
agent. La	m amiliar with, and accept the ob	ligations of, Section 607.0505, F	s authorized Florida Statu	tes.	on's board or directors. Thereby acce	pt the appointment as	; registered
SIGNATURE	themism We	Ver DENNIS	mu	ALKER		1-28-98 DATE	
12.	Signature, typed or printed name of registered	agent and title if applicable. (NO AND DIRECTORS	DTE: Registered	Agent signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFI		DC IN 10
TITLE	VIS	DELETE	1,1 TITL	E T	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTOR	Addition
NAME	Walker, Dennis	_	1.2 NAM				
STREET ADDRESS	4027 TRUMAN DR. 1.3			EET ADDRESS			
CiTY-ST-ZiP			4	Y-ST-ZIP			
TITLE			2.1 TOL	Ē		☐ Change	Addition
NAME	WALKER, BEVERLY		2.2 NAME		<i>s</i> _		,
STREET ADDRESS	4027 TRUMAN DR.		2.3 STR	eet Address			ļ
CITY-ST-ZIP				Y-ST-ZIP			
TITLE			3.1 TITL			☐ Change	Addition
NAME			3.2 NAM				ı
STREET ADDRESS	1			EET ADDRESS			
CITY-ST-ZIP		☐ DELETE		Y-ST-ZIP		Change	Addition
TITLE		- Dereste	4.1 TITE	ł		Change	T Younge
NAME			4, 2 NAM				
STREET ADDRESS CITY-ST-ZIP				EET ADDRESS '-ST-ZIP			,
TITLE		☐ DELETÉ	5.1 TITL			Change	Addition
NAME			5.2 NAM				
STREET ADDRESS			5.3 STRE	EET ADDRESS			
CITY-ST-ZIP				'-ST-ZIP			
TITLE		DELETE	6.1 TITU			Change	Addition
NAME			6.2 NAM	ie			
STREET ADDRESS			6.3 STRE	EET ADDRESS			
CITY-ST-ZIP				-ST-ZIP			
14. I herehu n	ert by that the information supplied	with this filing does not qualify	for the even	ontion etated in S	Section 119 07/3\(ii) Florida Statutes I	further certiful that the	information