

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J33889

(3)

1. Corporation Name

STUDIO ONE CAFE, INC.



Principal Place of Business

3100 N.E. 48TH ST.#512
APT#512
FT. LAUDERDALE FL 33308
US

Mailing Address

3100 N.E. 48TH ST.
APT.#512
FT. LAUDERDALE FL 3308
US

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

TASIC, JOSEPH

3100 N.E. 48TH STREET, APT.#512

APT 303

FT. LAUDERDALE FL 33308

3. Date Incorporated or Qualified

09/16/1986

3a. Date of Last Report

04/25/1995

4. FEI Number

59-2716460

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

10. Name and Address of New Registered Agent

81 Name

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

83 Delete APT 303

84 City

FL 85 Zip Code

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. Thereby 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 the applicant

(NOTE: If the registered agent is a corporation, the signature of the president or other officer is required.)

DATE

12. OFFICERS AND DIRECTORS

TITLE

P

☐ DELETE

NAME

TASIC, JOSEPH

STREET ADDRESS

3100 N.E. 48TH STREET

CITY-STATE-ZIP

FT. LAUDERDALE FL

TITLE

ST

☐ DELETE

NAME

JONAS, CAROL

STREET ADDRESS

3100 N.E. 48TH STREET, #512

CITY-STATE-ZIP

FT. LAUDERDALE FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

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STREET ADDRESS

CITY-STATE-ZIP

13.

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

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STREET ADDRESS

CITY-STATE-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☒ Addition

APT #512

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ 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 employed to prepare 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:

Carol Jonas Secretary/Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/4/96 (954)771-2433

Date

Daytime Phone

CR2E034 (12/95)