

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 # **K72473** (7)

1. Corporation Name

SUGAR MAGNOLIA, INC.



Principal Place of Business

Mailing Address

**LAWRENCE J. SCHER
1320 S DIXIE HWY STE.870
MIAMI FL 33146**

**LAWRENCE J. SCHER
1320 S DIXIE HWY STE.870
MIAMI FL 33146**

2. Principal Place of Business

21 **Ruth Rassler**

Suite, Apt. #, etc.

22 **2769 NW 28 Terr**

City & State

23 **Boca Raton FL**

24 **33434**

Country

25 **Palm Beach**

2a. Mailing Address

26 **Ruth Rassler**

Suite, Apt. #, etc.

27 **2769 NW 28 Terr**

City & State

28 **Boca Raton, FL**

29 **33434**

Country

30 **Palm Beach**

3. Date Incorporated or Qualified
03/14/1989

3a. Date of Last Report
04/28/1995

4. FEI Number
65-0107960

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

9. Name and Address of Current Registered Agent

**SCHER, LAWRENCE J.
1320 S DIXIE HWY
STE. 870
MIAMI FL 33146**

10. Name and Address of New Registered Agent

81 Name **Rassler Ruth**

82 Street Address (P.O. Box Number is Not Acceptable)
2769 NW 28 Terr

83

84 City **Boca Raton**

FL

85 Zip Code
33434

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. I, Ruth, 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

Ruth E. Rassler

DATE Registered Agent's previous report was filed

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **RASSLER, RUTH ELLEN**

STREET ADDRESS **2769 NW 28 TERRACE**

CITY-ST-ZIP **BOCA RATON FL 33434**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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 registered 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

Ruth E. Rassler

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**800001788088
-04/22/96--01020--021
***200.00**

4/4/96

407 483-2920

CR2E034 (12/95)