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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # K9341

(8)

1. Corporation Name

FERRARO'S ITALIAN PASTRY, INC.

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Principal Place of Business 860 NORTH FEDERAL HIGHWAY POMPANO BEACH FL 33062

860 NORTH FEDERAL HIGHWAY POMPANO BEACH FL 33062

Mailing Address

								3.	06/05/1989	Goameci	3a . <i>b</i> .	05/01		
2.	Principa' Place of Busin	ness	2a.	Mailing Address			-,	4.	FLI Number	^			Applied For	
21			26						59-256083		Not Applicable			
22	Suite, Apt. #, etc.		27	Suite, Apt. #, etc.				5.	Certificate of Status	Desired			75 Additional se Required	
23	City & State		28	City & State				6.	Election Campaign f Trust Fund Contribu	_			i.00 May Be ided to Fees	
24	Zip	Country 25	29	Zip	30 Co	intry			This corporation has Florida Statutes	☐ Yes	⊘ No			
	9. Nam	e and Address of Cu	rent Regis	stered Agent		1		10.	Name and Addres	s of New F	legistere	d Agent		
						81	Name							
	FERRARO, MAR 860 NORTH FEI	ne Deral Highway				82	Street Addre	ess (P.	O. Box Number is N	ot Acceptat	ole)			_
	POMPANO BEA	• • • • •				83								
						84	City				F	L 85	Zip Code	
		607.6	500 100	12 1E00 Elevido Ct.	obuton the ob	040-6	agend cornors	shon e	aboute this statemen	t for the nu	mose of o	changing	its registered office	ce

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.

5 GIVTOILE	sgnature, speed or printed name of supervisors agent and the it apply	acce (fa)(It	Hopuberel Agest signature regimed	
12.	OFFICERS AND DIRECTO	RS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP	DELETE	1. 1 TITLE	Change Addition
NAME	FERRARO, JOHN		1.2 NAME	
STREET ADDRESS	860 North Federal Highway		1.3 STREET ADDRESS	
CITY-ST-ZIP	POMPANO BEACH FL		1.4 CHY - S1 - 7IF	
TITLE	DST	DELETE	2 1 TiTLE	☐ Change ☐ Addition
NAME	FERRARO, MARIE		2.2 NAME	
STREET ADDRESS	860 NORTH FEDERAL HIGHWAY		2 3 STREET ACORESS	
City-ST-ZiP	POMPANO BEACH FL		2.4.CITY - ST - ZIP	
TITLE		☐ DELETE	3 1 TITLE	Change Addition
NAMÉ			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY - ST - ZIP			3 4 C+TY - ST - ZIP	
TITLE		DELETE	4 1 TI'LE	Change Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ACORESS	
C(TY-ST-ZIP			4.4 CITY - \$1 - 7/P	
TITLE		DELETE	5 1 THEE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-Z-P			5.4 CITY - ST - 7IP	
TITLE		☐ DELETE	6 1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STHEFT ADDRESS	
C(TY - \$1 - 7(P			6.4 CITY - ST - ZiP	

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and on one applied with 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 eath, 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: ///

ICLATURE AND TYPED OR POINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/96

Daytone Phone #

R2F034 (12/95)