

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
Jul 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K96507 (4)
1. Corporation Name
BURGER DELITE CORP.

Principal Place of Business % GEORGE H. LANGE 7800 APPLE TREE CIRCLE ORLANDO FL 32809 US	Mailing Address % GEORGE H. LANGE 7800 APPLE TREE CIRCLE ORLANDO FL 32809 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 744 MULBERRY AVE Suite, Apt. #, etc. 22 City & State 23 CELEBRATION, FL. Zip 24 34747 Country 25 USA	2a. Mailing Address 26 744 MULBERRY AVE Suite, Apt. #, etc. 27 City & State 28 CELEBRATION, FL. Zip 29 34747 Country 30 USA	3. Date Incorporated or Qualified 06/19/1989 3a. Date of Last Report 03/19/1996 4. FEI Number 59-2955632 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 8. Additional Fee Required \$8.75 May Be Added to Fees \$5.00 Yes <input type="checkbox"/> No <input type="checkbox"/>
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9. Name and Address of Current Registered Agent

LANGE, GEORGE H.
7800 APPLE TREE CIRCLE
ORLANDO FL

10. Name and Address of New Registered Agent

81 Name LANGE, GEORGE H. 82 Street Address (P.O. Box Number Is Not Acceptable) 744 MULBERRY AVE 83 84 City CELEBRATION 85 Zip Code FL 34747

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

George H. Lange

(NOTE: Registered Agent signature required when reinstating)

7/18/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LANGE, GEORGE H. 7800 APPLE TREE CIR. ORLANDO FL <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	George & Gail Lange 744 Mulberry Avenue Celebration, FL 34747 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LANGE, GAIL L. 7800 APPLE TREE CIR. ORLANDO FL <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	George & Gail Lange 744 Mulberry Avenue Celebration, FL 34747 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do 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 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:

George H. Lange

7/22/97 407 345 5217

CR2E034 (4/97)