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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # L29380

DISCOUNT RESTAURANT & BAKERY EQUIPMENT, INC.

Principal Place of Business

% MICHAEL A. HOLZMAN 7811 2ND AVE NW **BRADENTON FL 34209**

Suite, Apt. # etc.

SIGNATURE:

21

2. Principal Place of Business

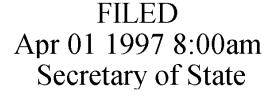
Mailing Address

2a. Mailing Address

% MICHAEL A. HOLZMAN 7811 2ND AVE NW **BRADENTON FL 34209-2111**

118 F

Suite, Apt. #, etc.





3a. Date of Last Report 04/29/1996

Applied For

0420798

Not Applicable

3. Date Incorporated or Qualified

11/13/1989

65-0169015

4. FEI Number

Suite, Ap	t.# etc	Suit 27	e, Apt. #, etc.		·· ·	5. Certificate of Status Desired Fee Regulred		
City & Sta	ate		& State			6. Election Campaign Financing \$5.00 May Be		
23		28	fradent	101	, FL	Trust Fund Contribution Added to Fees		
	Country	Zip		Cou	intry -	8. This corporation has liability for intangible tax under s. 199.032,		
24	25		1912	30	SP			
	9. Name and Address of Curre	nt Registered	J Agent			10. Name and Address of New Registered Agent		
	IRGO BELAGA				81 Name	1		
7811 2ND AVE NW					82 Street Address (P.O. Box Number is Not Acceptable)			
BR	ADENTON FL 34209							
					83			
					84 City	B5 Zip Code		
44 6					<u> </u>	FL ;)		
ottide or	rregistered agent, or both, in the Stal	e of Florida. S	uch change was	authorize	d by the corp	d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered		
agent 1	ani familiar with, and accept the obli	gations of, Sec	tion 607.0505, F	lorida Sta	utes.	, me appearance and appearance		
SIGNATURE			·					
12.	Signature, hyped on protect name of registered a	NO DIRECTOR		TE. Registere	d Agent signature	re required when renstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
Trite	PD	10 DIFFECTOR	DELETE	1.1 11	1) F	Change Addition		
NAME	BELAGA, MARGO			1.2 N		J. Johnson		
\$19EST ADDRESS	TOTAL ONED AND AND				TREET ADDRESS			
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City - St - 7lit				4.4 C	TY-57-71P			
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NAM	i			6.2 N	/ME			
STREET ADORESS	\$ [6.3 S	ireet address			
CITY-ST-ZIP					TY-ST-ZIP			
informat	ion indicated on this annual report or	supplemental	annual report is	true and a	accurate and	stated in Section 119.07(3)(i), Florida Statutes. I further certify that the of that my signature shall have the same legal effect as if made under oath; th		
na iral	officer or director of the corporation is in Block 12 or Block 13 if changed,	or the receiver	or trustee empo	wered to a	execute this r	report as required by Chapter 607, Florida Statutes; and that my name		

THE CHARLES

and Ave Nie