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

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L47248

CAFE HEIDELBERG, INC.

Principal Place of Business

Mailing Address

(4)

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**FILED** 

Jan 14 1997 8:00am

Secretary of State

% HORST EDLER 150 N US HWY ONE TEQUESTA FL 33469		% HORST EDLER 150 N US HWY ONE TEQUESTA FL 33469-2723		3. Date Incorporated or Qualified		te of Las		
					01/29/1990	06/1	7/1996	6
21 150	Place of Business NORTH US 1 N/A	26. Mailing Address 26. SAME			4. FEI Number 65-0202927		$\rightarrow$	Applied For Not Applicable
Suite, Apt. 22 <i>TEQU</i>	#, etc IESTA, FL	Suite Apt. #, etc.			5. Certificate of Status Desired			5 Additional Required
City & State / 23 33 469		City & State					00 May Be ed to Fees	
<i>Z</i> ip <b>24</b>	Country 25 // S.A.	Zip 29	Country 30	,	8. This corporation has liability for Florida Statutes	intangible t		r s. 199.032,
	9. Name and Address of Current	Registered Agent			10. Name and Address of New R	egistered A	gent	
EDL	er, horst		81	Name				
	WILLOW RD NUESTA FL 33458		82	Street Add	dress (P.O. Box Number is Not Accepta	ible)		
			83					
			84	City		FL	<b>85</b> Z	ip Code
office or r	to the provisions of Sections 607 0502 registered agent, or both, in the State of im familiar with, and accept the obligat	of Florida. Such change was a	authorized bi	the corpora	poration submits this statement for the atlon's board of directors. I hereby acceptance	nurnose of	changing intment	g its registered as registered
SIGNATURE								
12.	Signation typed or printer harmore translated agen OFFICERS AND		TE Registered Age	ent signature requ	ured when reinstating)  ADDITIONS/CHANGES TO OFFI	DATE CEDS AND	DIDECT	ODS IN 12
TITLE	D	DELETE	1 1 TITLE		ADDITIONS/OFFANGES TO OFF		Chang	
NAME	EDLER, VERENA		1.2 NAME			•		
STREET ADDRESS	24 WILLOW RD		1 3 STREET	ADDRESS				
CITY-ST-7IP	TEQUESTA FL		1.4 CITY-5	iT - ZIP				
Title	D	DELETE	21 TITLE			1	Chang	e 🔲 Addition
NAME	EDLER, HORST		2.2 NAME					
STREET ADDRESS	24 WILLOW RD		2 3 STREET	ADDRESS				
CHY-SI-ZIP	TEQUESTA FL		2 4 CiTy -	ST-ZIP				· <u> </u>
THILE		DELETE	31 TITLE			{	Chang	e L Addition
NAME			3.2 NAME					
STREET ADDRESS			3 3 STREET					
CITY - ST - ZIP		DELETE	3.4. CITY - 4.1 TITLE	51- <b>Z</b> IP		··	Chang	e Addition
NAME		Find process	4 2 NAME			L	—i onanâ	NO LI MOUIIIOII
STREET ADDRESS			4 3 STREET	ADORESS				
City - St - ZiP			4.4 City - S					
TITLE		DELETE	51 TITLE	. 4.11			Chang	e Addition
NAME			5.2 NAME			•	3	
STREET ADDRESS	ì 		5 3 STREET	ADDRESS				
CITY+S1+ZIP			5 4 CITY - 9					
1:TLE		DELETE	6.1 TITLE				Chang	e 🔲 Addition
NAME			6.2 NAME					
STREET ADDRESS			6 3 STREET	ADDRESS				}

CMY-ST-ZIP

14. I do hereby certify that the information supplied with this filling 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 Brock 12 or Block 13 Vichanged, or on an attachment with an address.

SIGNATURE: