FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 AM 11:14

DOCUMENT # L64213 (6)

1. Corporate Name

RENE'S SOUP N SANDWICH, INC.

Principal Place of Business

C/O RENE TURGEON
12731 MCGREGOR BLVD
FT. MYERS FL 33919-4412

Mailing Address

C/O RENE TURGEON
12731 MCGREGOR BLVD.
FT. MYERS FL 33919-4412

DO NOT WRITE IN THIS SPACE

3. Date Incorporated (or Qualified): 04/06/1990

3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21
Suite Apt. #
22
City & State
23
24 25

2a. Mailing Address
26
Suite Apt. #
27
City & State
28
29 30

4. FEI Number: 65-0197133

Applied For
Not Applicable

5. Certificate of Status (Fee Required) [ ] $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] $5.00 May Be Added to Fees

8. Do you anticipate the liability for corporate income tax for the current fiscal year? [ ] Yes [ ] No

9. Name and Address of Current Registered Agent

TURGEON, RENE
12731 MCGREGOR BLVD.
FT. MYERS FL

10. Name and Address of New Registered Agent

81 Name
82 Street Address, P.O. Box Number is Not Acceptable
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0505 of the Florida Statutes, the undersigned corporation submits the statement for the purpose of complying with the requirements of Section 607.0505 of the Florida Statutes, and the undersigned hereby accepts the appointment as registered agent for service of process within this state.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE D
NAME TURGEON, RENE
ADDRESS 12731 MCGREGOR BLVD.
CITY FT. MYERS FL

TITLE D
NAME TURGEON, BARBARA
ADDRESS 12731 MCGREGOR BLVD.
CITY FT. MYERS FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS

TITLE [ ] Change [ ] Addition
NAME
ADDRESS
CITY

TITLE [ ] Change [ ] Addition
NAME
ADDRESS
CITY

TITLE [ ] Change [ ] Addition
NAME
ADDRESS
CITY

TITLE [ ] Change [ ] Addition
NAME
ADDRESS
CITY

TITLE [ ] Change [ ] Addition
NAME
ADDRESS
CITY

TITLE [ ] Change [ ] Addition
NAME
ADDRESS
CITY

REMITTED BY MAY 1

14. I hereby certify that the information supplied with this report is complete, accurate and current as of the mandatory statutory date of Section 607.0505 of the Florida Statutes. I further certify that the information shall be the annual report or supplemental annual report of the corporation and that my signature shall have the same legal effect as if made under oath. That I am a director or officer of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607 of the Florida Statutes, and that my name appears above, or in block 12 or 13 hereof or on an attached sheet, if any.

SIGNATURE: Barbara C. Turgeon 4-26-95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

0323401 CP