

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

SEP 19 PM 12:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M25452
1. Corporation Name:
MONTELEONE'S ITALIAN DELI INC.

(7)

Principal Place of Business:
10430 W. ATLANTIC BLVD.
CORAL SPRINGS FL 33071

Mailing Address:
10430 W. ATLANTIC BLVD.
CORAL SPRINGS FL 33071

2. Principal Place of Business:

21) State, Apt. #, etc.
22) City & State
23) Zip
24) Country

2a. Mailing Address:

26) State, Apt. #, etc.
27) City & State
28) Zip
29) Country

9. Name and Address of Current Registered Agent

HAIMOWITZ, JANET
10895 N.W. 7TH STREET
CORAL SPRINGS FL 33065

*No longer with Corp as Secretary
to Nicholas A. Monteleone*

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/07/1986

4. FET Number

59-2617327

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81) Name: Nicholas A. Monteleone
82) Street Address (P.O. Box Number is Not Acceptable):
10400 N.W. 8th Court
83)
84) City: Coral Springs FL 33071

11. Pursuant to the provisions of Sections 607.0507 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 hereby duly and a duly qualified officer of the corporation, of Section 607.0508, Florida Statutes.

SIGNATURE: Nicholas A. Monteleone

Nicholas A. Monteleone

8-30-98

12. OFFICERS AND DIRECTORS:

1. TITLE: VPS TP
NAME: MONTELEONE, NICHOLAS A.
STREET ADDRESS: 10400 N.W. 8TH COURT
CITY, ST, ZIP: CORAL SPRINGS FL
TITLE: TP
NAME: MONTELEONE, ANGELA C.
STREET ADDRESS: 10400 N.W. 8TH COURT
CITY, ST, ZIP: CORAL SPRINGS FL
TITLE: ☒ DELETE
NAME: ☐ DELETE
STREET ADDRESS: ☐ DELETE
CITY, ST, ZIP: ☐ DELETE
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CITY, ST, ZIP: ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY, ST, ZIP: ☐ Change ☐ Addition
2. TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY, ST, ZIP: ☐ Change ☐ Addition
3. TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY, ST, ZIP: ☐ Change ☐ Addition
4. TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY, ST, ZIP: ☐ Change ☐ Addition
5. TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY, ST, ZIP: ☐ Change ☐ Addition
6. TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY, ST, ZIP: ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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:

Nicholas A. Monteleone

*JB
9-11-98*

CR2E034 (10/97)

2062

MONTELEONE'S ITALIAN DELI, INC.
10430 W. Atlantic Blvd.
Coral Springs, FL 33071
(954)344-0333
August 30, 1998

Florida Department of State
Sandra B. Mortham
Secretary of State
Division of Corporations
Corporate Records
P.O. Box 6327
Tallahassee, Florida 32314

Dear Ms. Mortham:

I have received your letter referring to the 400.00 late fee for my Corporate Annual Report. First I must apologize for not paying my fee of 158.75 for the report promptly.

I am 71 year old and I am trying to run my business for the last 2 years by myself. My wife had 3 strokes which resulted in dimensia and her incapacity to bathe herself never mind work full time in a deli. She requires full time care and cannot be left alone. This care is not covered by my HMO and therefore I have to pay for it out of my own pocket. My wife, Angela, also had two major surgeries in less than one year. One was to remove a kidney and the other to remove a gallbladder. My daughter who was working with me to help me out is now helping to take care of my wife and her family. I have a large mortgage payment every month that consumes a large portion of our pensions and leaves very little left over.

It has been a very very emotional, stressful and trying time for me. My business is doing terrible. I am not able to keep up with all the bills for the store or my house. I can't staff the deli properly to run a very demanding business because the money is just not there. There is not enough time in the day nor enough money to go around for all these mounting bills.

I am very sorry that the Corporate Annual Report for 1998 did not get taken care of properly. It just got burried under all the paper work on my desk.

Could you please reconsider the late fee for 400.00 and I will enclose a check for 158.75 for the report. I thank you for your consideration and attention to this matter.

Sincerely yours,


Mr. Nicholas A. Monteleone