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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # M76665

1. Corporation Name

(2)

RELISH THE THOUGHT, INC.

FILED Mar 13 1998 8:00am Secretary of State

HELISH THE IMOUGHT, IN	IU.				
Principal Place of Business	Mailing Address				DIBIN BIBNI BIBNI BIBNI BIBNI 1881
1020 MAGNOLIA DR. 1020 MAGNOLIA DR.					
OUINCY FL 32351 OUINCY FL 32351				DO NOT WRITE IN TH	HC CDACE
				DO NOT WRITE IN TH 3. Date incorporated or Qualified	IIS SPACE
				04/13/1988	
2. Principal Place of Business	2a. Mailing Address	s		4. FEI Number	Applied For
21	26			NOT APPLICABLE	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, et	łc.		5. Certificate of Status Desired	\$8.75 Additional
22	27			9, Certificate of Status Desired	Fee Required
City & State	City & State			6. Election Campaign Financing	\$5.00 May Be
23	28	ip Country		Trust Fund Contribution	Added to Fees
Zip Country	Zip	 	У	6. This corporation owes or has paid the	 -
24 25 25 Name and Address	29 of Current Registered Agent	30		Personal Property Tax due June 30. 10. Name and Address of New Register	
FLETCHER, A. CLARK	At Antique collection where		Name	16. Linus min Wantees of treat Helister.	AM 1.2 A.1.1.
2602 WEST 11TH STREET			<u> </u>		· · · · · · · · · · · · · · · · · · ·
PANAMA CITY FL 32401		6	Street Add	ress (P.O. Box Number is Not Acceptable)	
INTERNATION OF THE OPEN		8	<u>,</u>		
		L			
		8-	City	F	85 Zip Code
Pursuant to the provisions of Sections office or registered agent, or both, in agent. I am familiar with, and accept	s 607.0502 and 607.1508, Florida the State of Florida. Such change the obligations of, Section 607.05	Statutes, the abo was authorized to 505, Florida Statut	/e-named corpora by the corpora	poration submits this statement for the purposition's board of directors. I hereby accept the	—]]
SIGNATURE					
Signature, typod or printed name of ri		(NOTE: Registered A	jent signature requi		
TITLE P	CERS AND DIRECTORS DELET	13. TE 1.1 TITLE	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME CLARK, CHRISTOPHI		1.2 NAME			Consulta Consulta
STREET ADDRESS 3074 OVERLOCK DR		1.3 STREET ADDRESS			[8]
CITY-ST-ZIP CLEARWATER FL	•	1.4 CITY-	Į.		
TITLE V.	DELE1		31-21/		Change Addition
NAME CLARK, JOHN E.	_	2.2 NAME		,	
STREET ADDRESS 1020 MAGNOLIA DRI	VE		T ADDRESS		
CITY-ST-ZIP QUINCY FL		2. 4 CITY			
TITLE ST	DELET				Change Addition
NAME CLARK, IRENE		3.2 NAME			
STREET ADDRESS 1020 MAGNOLIA DRI	VE	3.3 STRE	T ADDRESS		
CITY-SI-ZIP QUINCY FL		3.4. CITY	ST-ZIP		
TITLE	☐ DELET	TE 4.1 TITLE			Change Addition
NAME CLARK, JOHN		4. 2 NAMI		•	
STREET ADDRESS 105 MONTROSS AVE	ENUE	4.3 STREE	T ADDRESS		
CITY-ST-ZIP RUTHERFORD NJ		4.4 CITY-	ST-ZIP		
TITLE	DELET	TE 5.1 TITLE			Change Addition
NAME CLARK, THOMAS J.		5.2 NAME			
STREET ADDRESS 139 ORCHARD STRE	ŁI .	5.3 STREE	T ADDRESS		
CITY-ST-ZIP SIOUX CITY IA		5 4 CiTY-	ST - ZIP		
TITLE	☐ DELET				Change Addition
NAME		6.2 NAME			
			,		J
STREET ADDRESS CITY-ST-ZIP			T ADDRESS		

14. I 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.

IGNATURE DEPLE CLANK TRENE E. CLARK 3/198 (800) PAGODI