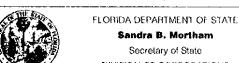
FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997 DOCUMENT # POPPY'S ENTERPRISES, INC.



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(8)

FILED								
May 09 1997 8:00am								
Secretary of State								



Principal Place of Business Mailing Address									
BOILS E 6TH AVENUE 601 S E 6TH AVENUE									
SUITE 101		SUITE 101		_					
DELRAY BEAC US	H FL 33483	US US	DELRAY BEACH FL 33483-5185 US			3. Date Incorporated or Qualified 08/03/1988	Date Incorporated or Qualified 08/03/1988 3a. Date of Last Report 05/01/1996		
2. Principal P	lace of Business	2a. Mailing A	ddress			4. FEI Number	1 	Applied For	
21		26				65-0066493		Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt	. #, etc.			5. Certificate of Status Desired	\$8.	75 Additional	
22 27						5. Communic of dialog besired	Fe	ee Required	
City & State	e	F1 -	City & State			6. Election Campaign Financing \$5.00 May Be			
Zip	Country		Zip Country			Trust Fund Contribution Added to Fees			
24	 		Country	8. This corporation has liability for intangible tyx under s. 199.037 Florida Statutes Yes V No			der s. 199.032,		
241	9. Name and Address of Cur	[29] rent Registered Ager		J	·····	10. Name and Address of New Reg			
1184	APKIN, JESSE D.			81	Name	TV. Traine and Address of them the	istored Agent		
	NE 20TH STREET, #113			82					
	CA RATON FL 33431				Street Addi	ess (P.O. Box Number is Not Acceptable)			
000	DA IRION I E 00401			83					
				L_					
		·		84	City		FL 85	Zip Code	
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, FI	orida Statutes, t	he above	e-named corp	poration submits this statement for the p	ironse of chang	ina its reaistered	
office or r	registered agent, or both, in the Sta im familiar with, and accept the ob-	ate of Florida. Such ch	nange was auth	orized by	the corporat	tion's board of directors. I hereby accep	t the appointme	nt as registered	
SIGNATURE	The second secon	and the original of	01.0000,110.111		••				
	Signature typed or printed name of registered	agent and title if applicable	(NOTE: Re	gistered Age	nt signature requi	red when reinstaling)	DATE		
12.		AND DIRECTORS		18.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	OTORS IN 12	
€ TITLE	D		DELETE	1.4 TOLE			Cha	ange 🔲 Addition	
NAME	LUMPKIN, JESSE D.			1.2 NAME	•				
STREET ADDRESS	450 NE 20TH ST #113			1.8 STREET	ADDRESS			001/01	
CITY-ST-ZIP	BOCA RATON FL		EE EE	1.4 CITY-S	1 - ZIP			33777	
TITLE		t.,.	DELETE	2.4 TITLE			L Cha	ange L Addition	
NAME				2.2 NAME					
STREET ADDRESS				2.3 STREET		•			
CITY-ST-ZIP			DELETE	2. 4 CITY - S	1-2IP		,	1.4.00	
TITLE		Ш	DELETE	3.1 TITLE			Cha	ange L_] Addition	
NAME OTOTET ADDDESS				3.2 NAME	1000000				
STREET ADDRESS				3.3 STREET					
CITY-ST-ZIP TITLE			DELETE	3.4. CITY-S 4.1 THLE	II-ZIP		Cha	ange Addition	
NAME		LJ	OLLE /F	4.2 NAME			L., 1016	ingo [] Additidii	
					ADDDE OC				
STREET ADDRESS				4 9 STREET	1	•			
CITY-ST-ZIP TITLE			DELETE	4.4 CITY-S 5.1 TITLE	1 - (11)		☐ Cha	ange Addition	
NAME			Deltip	5.2 NAME				ango <u>j</u> j. zhudi(idi)	
STREET ADDRESS			,	5.3 STREET	ADDRESS				
CITY-ST-ZIP									
TITLE			DELETE	5.4 CITY-S	1-114		☐ Cha	ange Addition	
NAME		<u></u>		6.2 NAME				go Li radición	
STREET ADDRESS				6.3 STREET	ADDRESS				
CITY-ST-ZIP				6.4 CITY-S					
								,	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. 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 3 if changed, or on an atlantment with an address.