

ANNUAL REPORT

DOCUMENT # P01000036694

1. Entity Name
NORTH LAUDERDALE DONUTS, INC.

FILED
Mar 10, 2004 8:00 am
Secretary of State

03-10-2004 90018 001 ***150.00

Principal Place of Business
7135 W MCNABB RD
NORTH LAUDERDALE, FL 33068

Mailing Address
7135 W MCNABB RD
NORTH LAUDERDALE, FL 33068

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
201 S.E. 15 TERRACE
Suite, Apt. #, etc.
SUITE 212

City & State
DEERFIELD BEACH, FL

Zip
33441

Country
USA



01272004 Chg-P CR2E034 (10/03)

4. FEI Number
65-1105444

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CAPOTE, BEATRIZ M
1101 BRICKELL AVENUE 17TH FLOOR
MIAMI, FL 33131

7. Name and Address of New Registered Agent

Name
LAWRENCE E. MULLINS, CPA

Street Address (P.O. Box Number is Not Acceptable)
201 S.E. 15 TERRACE SUITE 212

City
DEERFIELD BEACH, FL

Zip Code
33441

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Lawrence E. Mullins LAWRENCE E. MULLINS, CPA 3/5/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PT
FERREIRA, JOSEPH
9381 NW 18 MANOR
FORT LAUDERDALE, FL 33322

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VPS
FERREIRA, BABBARA
9381 NW 18 MANOR
FORT LAUDERDALE, FL 33322

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VP
CHARLES L. CUTLER
3320 WASHINGTON LN
COOPER CITY, FL 33026

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

S
MICHAEL J. FERREIRA
4120 STAGHORN LN
WESTON FL. 33331

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

T
EDWARD L. CUTLER
6204 PARADISE POINT DR,
MIAMI, FL 33157

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Edward L. Cutler EDWARD L. CUTLER 1/26/04 305-274-9274
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #