

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

FILED
May 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P32898** (9)
1. Corporation Name
CINNABON, INC.

Principal Place of Business
**936 N. 34TH SUITE 206
SEATTLE WA 98103**

Mailing Address
**936 N. 34TH SUITE 206
SEATTLE WA 98103**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/20/1991	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 91-1498362	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		10. Name and Address of New Registered Agent	
		81	Name
		82	Street Address (P.O. Box Number is Not Acceptable)
		83	
		84	City
		85	Zip Code

11. Pursuant to the provisions of Sections 607.0502 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD	1.1 TITLE	
NAME	KOMEN, RICHARD B.	1.2 NAME	
STREET ADDRESS	3517 43RD N.E.	1.3 STREET ADDRESS	
CITY-ST-ZIP	SEATTLE WA	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	
NAME	YOUNG, STUART	2.2 NAME	
STREET ADDRESS	5500 NE KENRITH RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	SEATTLE WA	2.4 CITY-ST-ZIP	
TITLE	ST	3.1 TITLE	President
NAME	GILLETTE, KERN	3.2 NAME	
STREET ADDRESS	2108 NW 199TH	3.3 STREET ADDRESS	
CITY-ST-ZIP	SEATTLE WA	3.4 CITY-ST-ZIP	
TITLE	PDAS	4.1 TITLE	
NAME	WALDRON, DENNIS M.	4.2 NAME	
STREET ADDRESS	5401 N.E. 85TH STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	SEATTLE WA	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	Vice President
NAME		5.2 NAME	Greg Komen
STREET ADDRESS		5.3 STREET ADDRESS	936 N. 34TH Street, 3rd Floor
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Seattle, WA 98103
TITLE		6.1 TITLE	Asst. Secretary, Asst. Treasurer
NAME		6.2 NAME	Lenore Krentz
STREET ADDRESS		6.3 STREET ADDRESS	936 N. 34TH Street, 3rd Floor
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Seattle, WA 98103

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.

SIGNATURE: *[Signature]* 4/29/98 (202) 548-1032

CR2E034 (10/97)