FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P9200000183	(3)

1. Corporation Name

FLEGANT KITCHENS, INC.

Principal Place of Business	Mailing Address
3350 WATER OAKS DR	3350 WATER OAKS DR
HOLLYWOOD FL 33021	HOLLYWOOD FL 33021



3350 WATER OAKS DR HOLLYWOOD FL 33021			3350 WATER OAKS DR HOLLYWOOD FL 33021		3. Date Incorporated or Qualified 10/28/1992	3a. Date of Last Report 05/01/1995	
Principal Place of Business 2a. Mailing Address				4. FEI Number 65-0367025	Applied For Not Applicable		
Suite, Apt. #, etc.		Suite, Apt #, etc	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip 29	Country 30	,	8. This corporation has liability for Florida Statutes Yes	intangible tax under s 199.032, ☐ No	
4	9. Name and Address of Curre				10. Name and Address of New F	Registered Agent	
	g. Name and Address of Curre	Alt Hogistolet Algeria	Bi	Name			
TOBY, S			82	Street Add	dress (P.O. Box Number is Not Acceptate	ole)	
14697 N STE 201	ie 18th ave I		83	<u> </u>			
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SIGNATURE. S	jranae tyresterprotestrana ethogoles rap OFFICERS A	oraideo fapulado. ND DIRECTORS ☑ DELETE	#13.		ADDITIONS/CHANGES TO OF	FIGERS AND DIFFECTORS IN 12	
NAME	GLASSMAN, LUCILLE	E Decemb	1,2 NAM		Janie Glassman To Donothy SFlang	a 3331 Famagut	
STREET ADDRESS	3350 WATER OAKS DR			ADDRESS C	Hollywood F1 33	021	
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I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this arrusal export 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 distributes that my name appears in Block 12 or Block 13 if changed, or distributes that my name appears in Block 12 or Block 13 if changed, or distributes the same legal effect as if made under the same legal effect as if made under

SIGNATURE:

TURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR