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PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Socretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P92000008803 (8)

3333 S CC STE 401	FRANCHISE GROUP, INC. ICC Of Business OMGRESS AVENUE EACH FL 33445	Mailing Address 333 \$ CONGRESS A STE 401 DELRAY BEACH FL 3:		3. Date Incorporated or Qualifi	
	_	US			
	Place of Business	2a. Mailing Address		11/30/1992 4. FET Number	02/28/1995
21		26		65-0382192	Applied For
Suite, Ap	t.#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	Not Applicable \$8.75 Additional
City & Sta	nte	27			Fee Required
23		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Ζφ	Country	Zip	Country		Added to Fees
24	25	29	30	Florida Statutes	for intangible tax under s 199.032, Yes 7 No
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New	
			81 Name	9	g-service vigorit
MARKS	, DONALD M.		82 Street	t Address (P.O. Box Number is Not Accep	toblo
	CONGRESS AVE		Li	- Son Hamber is Not Accep	кареј
SUITE			83		
DELIVA	Y BEACH FL 33445		84 City		
11. Pursuant	to the provisions of Sections 657 050	2 and 607 15:00 5		corporation submits this statement for the ps board of directors. Thereby accept the o	FL 85 Zip Code
	to the provisions of Sections 607,050 erad agent, or both, in the State of Flor with, and accept the obligations of, Sec	TOTAL CO. LOCAS, FIDINGS STATUTES	·-		
SIGNATURE	Sterative typic cripii satratii chappienstajus OFFICERS AN	Caracter Lang Casas NO ID DIRECTORS	9°E Registered Againt signature 13.	rouwed when reinstamy	OATE FFICERS AND DIRECTORS IN 12
SIGNATURE 12. IIILE	Signative types coperationable of equilibries age. OFFICERS AN	Care Co Employers (NO	13.	rouwed when reinstamy	CIATE
SIGNATURE 12. TITLE NAME	Signative types coper sor each of equals and age. OFFICERS AN DPC LEINER, MEL	D DIRECTORS DELETE	13. 1 Title 12 NAME	rouwed when reinstamy	OATE FFICERS AND DIRECTORS IN 12
SIGNATURE: 12. IITLE NAME STREET ADDRESS DITY - ST- 7 IP	OFFICERS AN OFFICERS AN DPC LEINER, MEL 3333 S. CONGRESS AVE, ST DELRAY BEACH FL	D DIRECTORS DELETE	13. 1 Title 1.2 NAME 1.3 STREFT ADDRESS	rouwed when reinstamy	OATE FFICERS AND DIRECTORS IN 12
SIGNATURE: 12. TITLE VAME STREET ADDRESS DITY - ST- 7/P -TLE	OFFICERS AN OFFICERS AN DPC LEINER, MEL 3333 S. CONGRESS AVE, ST DELRAY BEACH FL PCD	D DIRECTORS DELETE	13. 1 Title 12 NAME	ADDITIONS/CHANGES TO O	OATE FFICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE 112. ITHE VAME STREET ADDRESS SITY - ST- ZIP	OFFICERS AN DPC LEINER, MEL 3333 S. CONGRESS AVE, ST DELRAY BEACH FL PCD DONALD, MARKS	D DIRECTORS DELETE	19: Engineerd Aport signature 19: 1 1 Tifle 12 NAME 13 STREFT ADDRESS 14 CITY ST-ZIP	rouwed when reinstamy	OATE FFICERS AND DIRECTORS IN 12
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