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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000027992 (5)

FILED May 02 1997 8:00am Secretary of State

0321857

THE DANDEE DONUT FACTORY INC. Principal Place of Business 1900 E. ATLANTIC BLVD. POMPANO BEACH FL 33351 US Mailing Address 1422 S FEDERAL HWY DEERFIELD BEACH FL 33441-7223 US					
00		00		3. Date Incorporated or Qualified	3a. Date of Last Report
• Dringing Di	loop of Queinoon	2a. Mailing Address		04/12/1993 4. FEI Number	05/01/1996
2. Principal Place of Business		26		65-0407224	Applied For Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.			60 7F A 1 111
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28 Z _I p	Country	Trust Fund Contribution	Added to Fees
24	25	} ` .	30	8. This corporation has liability for I	ntangible tax under s. 199.032, Yes
241	g, Name and Address of Curre		1301	10. Name and Address of New Re	
PUC	CINE, FRANK A		81 Name		<u> </u>
613 EAST RIVER DRIVE MARGATE FL 33063			82 Street Address (P.O. Box Number is Not Acceptable)		
			B4 City		85 Zip Code
44 Diversort	to the recognisms of Costions 607.06	02 and 607 1509 Florida Statut	os the should named corr	avation a shorter this statement for the s	FL 35 ZIP COOR
office or n	egistered agent, or both, in the Stat	e of Florida. Such change was a	uthorized by the corporat	oration submits this statement for the p ion's board of directors. I hereby accep	orpose or changing its registered it the appointment as registered
	m tamiliar with, and accept the obli	gations of, Section 607.0505, Flo	rida Statutes.		4/27/07
SIGNATURE.	Signature, typed or printed name of registered as	geni and title if applicable (NOTE	: Registered Agent signature requir	(ed when reinstating)	DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	D ANUGERIA DETERMA	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	SPYREDES, PETER A 3331 NE 14TH TERRACE		1.2 NAME		
STREET ADDRESS CITY-ST-ZIP	POMPANO BEACH FL		1.3 STREET ADDRESS		
TITLE	P	DELETE	1 4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME	PUCINE, FRANK A		2.2 NAME		
STREET ADDRESS	613 EAST RIVER DRIVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	MARGATE FL		2. 4 C/TY - ST - Z/P		
TITLE	· 	DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		•
STREET ADDRESS			3.3 STREET ADDRESS		
DILE		DELETE	3.4. CITY+S1-ZIP 4.1 TITLE		Change Addition
NAME		La Direit	4. 2 NAME		FT Assurance FT vacation
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CiTY+ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		[7] S.F. FFF	5.4 CiTY - ST - ZiP		TIALLE CLASS
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME CTULET ADDRESS			6.2 NAME		
STREFT AUDRESS			6.3 STREET ADDRESS		
14. I do hereb	by certify that the information supplied	ed with this filing does not qualif	6.4 CITY-ST-ZIP y for the exemption stated	in Section 119.07(3)(i), Florida Statutes	3. I further certify that the
information Lam an of appears in	n inclicated on this annual report or flicer or director of the corporation of Block 12 or Block 13 if oranges, (supplemental annual report is to the inceiver or trustee empower or on an attachment with an add	ue and accurate and that ered to execute this repor ress	on Section 119.07(3)(i), Florida Statutes my signature shall have the same legal t as required by Chapter 607, Florida S	effect as if made under oath; that latutes; and that my name