

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 01, 1999 8:00 am
Secretary of State

04-01-1999 90057 028 ***150.00

DOCUMENT # P93000029178

1. Corporation Name

BLIMPIE DEVELOPMENT, INC.

Principal Place of Business

4889 W. SPENCER FIELD RD.
PACE FL 32571
US

Mailing Address

4889 W. SPENCER FIELD RD.
PACE FL 32571
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/19/1993

4. FEI Number

59-3270741

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes

☐

No

2. Principal Place of Business

21 4893 W. Spencer Field Rd

Suite, Apt. #, etc.

22 Pace, FL

City & State

23 32571

Zip

Country

25 US

2a. Mailing Address

26 4893 W. Spencer Field Rd

Suite, Apt. #, etc.

27 Pace, FL

City & State

28 32571

Zip

Country

30 US

9. Name and Address of Current Registered Agent

FLETCHER, WINSTON L
4889 W. SPENCER FIELD RD.
PACE FL 32571

10. Name and Address of New Registered Agent

81 Name

Fletcher, Winston L

82 Street Address (P.O. Box Number is Not Acceptable)

4893 W. Spencer Field Rd

83

Pace

84 City

FL

85 Zip Code

32571

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

Winston L Fletcher Vice Pres.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

3-30-99

12. OFFICERS AND DIRECTORS

TITLE P ☒ DELETE

NAME JENRICH, ERIC D
STREET ADDRESS 186-G NE EGLIN PKWY.
CITY-ST-ZIP FT. WALTON BCH. FL

TITLE VP ☒ DELETE

NAME FLETCHER, WINSTON L
STREET ADDRESS 4889 W. SPENCER FIELD RD.
CITY-ST-ZIP PACE FL 32571

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME JENRICH, ERIC D
1.3 STREET ADDRESS 51 3rd Street Bldg. 5
1.4 CITY-ST-ZIP Shalimar, FL. 32579

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME VP Fletcher, Winston L
2.3 STREET ADDRESS 4893 W. Spencer Field Rd.
2.4 CITY-ST-ZIP Pace, FL. 32571

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

Winston L Fletcher

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-30-99

Date

850-995-8030

Daytime Phone #

CD25034 (11/98)