

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

CORPORATION ANNUAL REPORT 1995-1-95

FLORIDA DEPARTMENT OF STATE  
Sandy B. Monahan  
Secretary of State  
DIVISION OF CORPORATIONS

3-5825-C

**APPROVED AND FILED**

05 MAY -1 PH 9:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000031637 (0)**

1. Corporation Name  
**BAGEL BARN, INC.**

Principal Place of Business: 1405 SUNSET DRIVE CORAL GABLES FL 33143

Mailing Address: 1405 SUNSET DRIVE CORAL GABLES FL 33143

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified: **04/30/1993**

3a. Date of Last Report: **04/28/1994**

4. FEI Number: **65-0406412**

5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

6. This corporation has liability for intangible tax under § 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business (21-23)

2a. Mailing Address (26-28)

24. Zip Country (25-29)

9. Name and Address of Current Registered Agent

**DAVS, MARC C**  
**11850 S.W. 94TH STREET**  
**MIAMI FL 33186**

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: \_\_\_\_\_ DATE: \_\_\_\_\_

Signature: Typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when resigning.

12. OFFICERS AND DIRECTORS

TITLE: **D**

NAME: **DAVIS, MARC C**

STREET ADDRESS: **11850 S.W. 94TH ST.**

CITY ST ZIP: **MIAMI FL 33186**

TITLE: **D**

NAME: **DAVIS, MILAGRO L**

STREET ADDRESS: **11850 S.W. 94TH ST.**

CITY ST ZIP: **MIAMI FL 33186**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE  Change  Addition

12 NAME

13 STREET ADDRESS

14 CITY ST ZIP

21 TITLE  Change  Addition

22 NAME

23 STREET ADDRESS

24 CITY ST ZIP

31 TITLE  Change  Addition

32 NAME

33 STREET ADDRESS

34 CITY ST ZIP

41 TITLE  Change  Addition

42 NAME

43 STREET ADDRESS

44 CITY ST ZIP

51 TITLE  Change  Addition

52 NAME

53 STREET ADDRESS

54 CITY ST ZIP

61 TITLE  Change  Addition

62 NAME

63 STREET ADDRESS

64 CITY ST ZIP

14. 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)(b), 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 not attached with an address.

SIGNATURE: *Marc C Davis* 4/27/95 (305) 663-9244

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR