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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 09 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000052215 (9)

GATEWAY DELI, INC.

OTV - \$1 - 7/P

appears in Block 12 or Block 13 if changed, or on an attachment

Principal Place of Business Mailing Address C/O GEORGE L GOBER & CO 7809 W. COMMERCIAL BLVD. 7809 W COMMERCIAL BLVD TAMARAC FL 33351 TAMARAC FL 33351-4361 Date Incorporated or Qualified Sa. Date of Last Report 07/20/1993 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0438915 Not Applicable 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation has liability for intangible tax under s. 199.032, Country Ζφ ☐ Yes 25 29 30 Florida Statutes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent DOGAGIS, PADELIS 81 Name 7809 W COMMERCIAL BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) TAMARAC FL 33351 83 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 Signature, typical or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 96/6) 12. DELETE 1 1 TITLE Change TITLE DOGAGIS, PADELIS 1.2 NAME 61 S.W. 91ST AVE., APT. 101 1.3 STREET ADDRESS STREET ADDRESS PLANTATION FL 33324 1.4 CITY - ST - ZIP CHTY-ST-ZIE DELETE Change Addition THEF 2.1 TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADORESS 2.4 CITY-ST-ZIP CITY - ST - ZIP Addition DELETE Change 3.1 TITLE THTLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - \$1 - 20F 3.4 CITY-ST-ZIP DÉLETE Change Addition 4.1 TITLE: 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS QPY-ST-24 4.4 CITY - ST - ZIP DELETE Change Addition TÉLE 5.1 TITLE NEME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST- ZIP 5.4 CITY-ST-ZIP ■ DELETE 6.1 TITLE Addition TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 City - ST-7IP 14. I do 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 807, Florida Statutes; and that my name