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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000058477 (9)

BUNNY'S CAFE OF LARGO, INC.

**FILED** Feb 10 1998 8:00am Secretary of State

|--|--|

Principal Place	of Business	Mailing Address					AMI BINDI JUHA QAMIT I <b>b</b> a	III (884 I88)	
10500 ULMERTON ROAD SUITE 288 LARGO FL 34641		10500 ULMERTON ROAD SUITE 288 LARGO FL 34641				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
Principal Pi	ace of Business	2a, Mailing Address				08/20/1993 4. FEI Number	1 14		
<del></del>	ace or phanesa	<b>∤</b> ¬ ~ ~ ~				1 '	<del></del>	oplied For	
Suite, Apt.	# elc	<b>26</b>   Suite, Apt. #, etc.				59-3197259	60.75	ot Applicable Additional	
22	**	27				Certificate of Status Desired	Fee Re	equired	
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added	May Be to Fees	
Zip	Country	Zipi	Zipi Country			8. This corporation owes or has paid the current year Intangible			
24	[25]	[29]	30			Personal Property Tax due June 30. Pres No			
	9. Name and Address of Curre	nt Registered Agent		241		10. Name and Address of New Regist	ered Agent		
	RAGUE, RICHARD D			81	Name				
	600 ULMERTON ROAD TE 288		82 Street Add			Idress (P.O. Box Number is Not Acceptable)			
	RGO FL 34841		Ī	83					
				64	City		FL 85 Zip (	Code	
11. Pursuant t	o the provisions of Sections 607.05	02 and 607 1508, Florida Stat	utes, the ab	ove	-named co	propration submits this statement for the purp	ose of changing it	ts 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									
<del></del>	Signature, lyped or profed name of registered ag			Agen	nt signature rec		DATE	201146	
12.	P	ND DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFICERS	Change	X Addition	
NAME			1.2 NAI						
STREET ADDRESS	1801 WHISPERING DR W		1		ADDRESS 3	10700 US HUY19N H44			
CITY-ST-ZIP	LARGO FL				TIO (	PalmHarbur FL 34684	1		
TITLE	VD	DELETE	1.4 CIT 2.1 TIT		- 2117	100 PC 3100	Change	Addition	
NAME	PENNETT, SANDRA M.	<b>L</b>	2.2 NAI				C. Silango	· · · · · · · · · · · · · · · · · · ·	
STREET ADDRESS	1550 S BELCHER RD APT 5	35	2.3 STREET A		ADDRESS				
CITY-ST-ZIP	CLEARWATER FL	00	2. 4 CI						
TITLE	000	DILETE	3.1 TiT		1 · 2   r		Change	Addition	
NAME			3.2 NA						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			3.4. CI					İ	
TITLE			4.1 TIT		-"		☐ Change	☐ Addition	
NAME			4. 2 NA						
STREET ADDRESS			4 3 STF	REET A	ADDRESS				
CITY-ST-ZIP			4.4 CIT	Y-ST	- ZIP				
TITLE		DELETE	5 1 TITI	LE			Change	Addition	
NAME			5.2 NA	ME	ĺ				
STREET ADDRESS			5 3 STF	REET A	ADDRESS				
CITY-ST-ZIP			5.4 CIT	Y-ST	- ZIP				
TITLE		☐ DELETE	61 TIT	.E			☐ Change	Addition	
NAME			6.2 NA	ME					
\$TREET ADDRESS			6 3 STA	EET A	ADDRESS				
CITY-ST-ZIP			6.4 CIT						
14. I hereby c	ertify that the information supplied y	vith this filing does not qualify				in Section 119.07(3)(i), Florida Statutes. I furth	ner certify that the	information	

indicated on this annual report or supplemental amount 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, some an officer or director of 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, some an officer or director of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

1,29.98

813-587-0046