Applied For Not Applicable

FILED Mar 24, 1999 8:00 am

Secretary of State

03-24-1999 90057 047 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000067519

1. Corporation Name

M & J DONUTS #5, INC.

Principal Pl	ace of Business	Mailing Address	·-··							
15905 NW 57TH AVE. 15905 NW 57TH AVE.										
MIAMI FL 33	i015	MIAMI FL 33015				DO NOT WRITE IN THIS SPACE				
1						3. Date Incorporated or Qualifed 09/28/1993				
2. Principa	I Place of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Applie	ed For	
21		26				65-0443540			pplicabl	
Suite, A	Suite, Apt. #, etc.	Apt. #, etc.			-5- Certificate of Status Desired					
	State	City & State	⊢ ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country	Zip	Cot	Country		8. This corporation owes the current year Intangible Personal Property Tax.				
						10. Name and Address of New Registered Agent				
1	Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country Zip 25 9. Name and Address of Current Registered Agent SANTOS, MARIANO M 18714 NW 67TH AVE. MIAMI FL 33015			81 82	Name Street Addre	ess (P.O. Box Number is Not Acceptable)				
1				"2	Street Address (1.10. Box Humbor to Hot / today address					
M	IAMI FL 33015			83						
{	,			84	City		FL 85	Zip Coo	•	
l office o	ant to the provisions of Sections 607.0 or registered agent, or both, in the Stat I am familiar with, and accept the obli	te of Florida. Such change wa	s authorize	a bv	me corporatioi	oration submits this statement for the purpon's board of directors. I hereby accept the	ose of changir appointment	ng its reg as regisi	jistered tered	
SIGNATUR	RE						ATE			
	Signature, typed or printed name of registered a		OTE: Registered	a Agen	l signature required	ADDITIONS/CHANGES TO OFFICE		CTORS	IN 12	
12.	P	AND DIRECTORS		m =	1	ADDITIONS/OFFANGES TO OFF TOE	□ Chi		☐ Additi	
TITLE	SANTOS MARIANO	C Deteir	1.1 N					J	_	
NAME	40744 ARM CTTLI AVE			1.3 STREET ADORESS						
STREET ADDRE	ANAME TO SOME	N.			WOUNEDS !					

CTORS IN 12 ☐ Addition CITY-\$T-ZIP MIAMI FL 33015 1.4 CITY-ST-ZIP Change Addition ☐ DELETE 2.1 TITLE TITLE SANTOS JORGE 22 NAME NAME 15155 NW 92 ST. 2.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33016** 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition ["] Change ☐ DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP 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 807. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an hment with an address, with all ther like empowered.

SIGNATURE:

CR2E034 (11/98)