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PROFIT CORPORATION **ANNUAL REPORT**

1997

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000070936 (8)

FILED Apr 21 1997 8:00am Secretary of State



DOCUMENT # P93000070936 (8) SARASOTA DELI PROVISIONS, INC. Principal Place of Business Address 2360A WHITFIELD PARK AVE SARASOTA FL 34243 BRADENTON FL 34202-9771						
U\$				3. Date Incorporated or Qualified	3a. Date of Last	Report
2. Principal P	Place of Business	2a. Mailing Address		10/07/1993 4. FEI Number	05/01/1996	Applied For
1		26		65-0444491	II	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	1) 7	Additional
City & Stat	9	City & State	······································	& Starties Compaign Financing		Required
3		28		Election Campaign Financing Trust Fund Contribution		May Be d to Fees
Zip	Country	Zip	Couritry	8. This corporation has liability for it		s. 199.032,
4	25	29	30		Yes 🗌 No	
	Name and Address of C.ROBERT F.	urrent Registered Agent	81 Name	10. Name and Address of New Reg	gistered Agent	
6714 OAK HAMMOCK DR BRADENTON E FL 34202			82 Street Ad 83 City	idress (P.O. Box Number is Not Acceptab) Code
	im familiar with, and accept the	State of Florida. Such change was obligations of, Section 607.0505, F	authorized by the corpor lorida Statutes.	orporation submits this statement for the pration's board of directors. I hereby accep	ot the appointment a	s registered
SIGNATURE	Bignature, typod or printed name of register OFFICERS	ed agent and title if applicable. (NC S AND DIRECTORS	D1E: Registered Agent signature req		DATE ERS AND DIRECTO	RS IN 12
SIGNATURE	Signature, typod or printed name of register	red agont and title II applicable. (NC	13. 1.1 THE 1.2 NAME	quired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE ERS AND DIRECTO Change	RS IN 12
SIGNATURE 12. TITLE NAME	OFFICERS D FOX, ROBERT F 1544 CHADWICK WAY	ed agent and title if applicable. (NC S AND DIRECTORS	13. 1.1 THUE 1.2 NAME 1.3 STREET ADDRESS	quired when reinstating) ADDITIONS/CHANGES TO OFFICE O714 OAK HAMMOCK DRIV	DATE ERS AND DIRECTO Change	RS IN 12
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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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.