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

Mailing Address

120 E. PANAMA ROAD WINTER SPRINGS FL 32708-3530

2a. Mading Address

City & State

Suite, Apt. #, etc.

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Dernardine

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business
120 E. PANAMA ROAD

WINTER SPRINGS FL 32708

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9300076680 (6)

SUGARPLUM FACTORY, INC.

Zφ Country Żip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MAGILL, PATRICK M ESQ 2110 E. ROBINSON STREET Street Address (P.O. Box Number is Not Acceptable) 82 ORLANDO FL 32803 83 84 City 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 (NOTE: Registered Agent signature required when reinstating) Sign else (spires or printed numero) registered agent and title élemplicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE Change Addition 1.1 TITLE TULE ROADERICK, BERNARDINE F 1.2 NAME NAME 120 E. PANAMA ROAD 1.3 STREET ADDRESS STREET ADDRESS WINTER SPRINGS FL 32708 1.4 CITY - ST-ZIP CITY-ST-ZIP DELETE 2.1 DTLE Change Addition TITLE FAUQUHER, CHRISTY R 2.2 NAME NAME 802 S WINTER PARK DRIVE 2.3 STREET ADORESS STREET ADDRESS CASSELBERRY FL 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3 1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CRLY - ST - ZIP 34. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIE 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE NAME **5.2 NAME** 5.3 STREET ADDRESS STREET ACCRESS 5.4 CITY-ST-ZIP CITY - S1 - ZIF DELETE ☐ Change Addition TIFLE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 City - ST- ZIP CHTY-S1-7P 14. I do hereby certify that the information supplied with this filling 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.

FILED
Jan 15 1997 8:00am
Secretary of State



3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

01/30/1996

3. Date Incorporated or Qualified

11/01/1993

59-3209118

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

4. FEI Number