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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P93000080304 (7)

SWEETIES, INC.

FILED Feb 21 1997 8:00am Secretary of State



Principal Plac	ce of Business	Mailing Address	· · · · · · · · · · · · · · · · · · ·	T TODICIDAL TIN DOLDA CINCL WHILE BOLIS BOLIS BOLIS WHILE WH	
842 DODECANESE BLVD. TARPON SPRINGS FL 34689		842 DODECANESE BLVD. Tarpon Springs FL 34689-3134		·	
US	1100 12 97009	US	57V05-010-7		
				3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1996	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number Applied For	
21		26		59-3211089 Not Applicable	
Suite, Apt.	. #, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional	
City & Stat	to	City & State		Fee Required	
23	ic.	28	•	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	This corporation has fiability for intangible tax under s. 199.032,	
24	25	29	30	Florida Statutes Yes No	
	9. Name and Address of Curren			10. Name and Address of New Registered Agent	
PLE	TCHER, MELODY		81 Nam	POLETONE A NEL AND	
390	6 FIELDSTONE CT. #124		et Address (P.O. Box Number is Nd. Acceptable)		
PAL	PALM HARBOR FL 34684			SOL PADDOCK DR	
			83		
			84 City	Tool 2: Oak	
				PALM HARBOR FL 18 30684	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Sta	tutes, the above-name	od corporation submits this statement for the purpose of changing its registered orporation's board of directors. I hereby accept the appointment as registered	
agent. I a	registered agent, or both, in the State am familiar with, and accept the obliga	or Fiorida. Such change wi itjons of, Section 607.0505,	as autnorized by the co Florida Statutes.,	orporation's board of directors. I hereby accept the appointment as registered	
SIGNATURE.	Melody P	etcher.	Present	ent 2-14-97	
	Signature, typed or printed name of registered ager		VOTE: Registered Agent signat	ure required when reinstating) DAYE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PLETCHER, MELODY A	☐ DELETE	1.1 TITLE	PLETCHER, MELODY Change Addition	
NAME	3906 FIELDSTONE CT. #124		1.2 NAME	ACAL DODAK DV	
STREET ADDRESS	PALM HARBOR FL 34684		1.3 STREET ADDRESS	PALM HARBOR FL 34684	
CITY-ST-ZIP TITLE	C C C C C C C C C C C C C C C C C C C	DELETE	1.4 CITY-ST-ZIP	**** *********************************	
	SMALL, GLENFORD R	. C. Detele	2.1 TITLE	The second secon	
NAME	3906 FIELDSTONE CT. #124		2.2 NAME	Small, Glenford R. 2801 PADDOCK DR.	
STREET ADDRESS	PALM HARBOR FL 34684		2.3 STREET ADDRESS	PALM HARBOR FL 34684	
CITY-ST-ZIP TITLE	17441100111601001	DELETE	2 4 CITY-ST-ZIP 3 1 TITLE	☐ Change ☐ Addition	
NAME		- Section	3.2 NAME	Addition	
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-SY-ZIP	· ·	
TITLE		DELETE	4.1 TITLE	Change Addition	
NAME			4.2 NAME	Salar County Section 1	
STREET ADDRESS			4.3 STREET ADDRESS	s	
CITY-S1-7/P			4.4 CITY-SY-ZIP		
TATLE		☐ DELETE	5.1 TITLE	Change Addition	
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS	s	
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE	Change Addition	
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS	s	
CITY-ST-ZIP			6.4 CITY+ST-ZIP		

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 eath; 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.

SIGNATURE:

SIGNA VIJE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-14-97 (813) 937-8825