FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY 10 AM 10: 15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000004944 (2)

1. Corporation Name
HARVARD FINANCIAL SERVICES, INC.

Principal Place of Business	Mailing Address
1085 W. MORSE BLVD. WINTER PARK FL 32789	1085 W. MORSE BLVD. WINTER PARK FL 32789

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/20/1994
3a. Date of Last Report:

4. FEI Number: 59-3221559 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199 Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 1964 Howell Branch Rd.	26 1964 Howell Branch Rd.
Suite, Apt. # etc. 22 Suite 110	Suite, Apt. # etc. 27 Suite 110
City & State 23 Winter Park, FL	City & State 28 Winter Park, FL
Zip 24 32792 / Country 25	Zip 29 32792 / Country 30

9. Name and Address of Current Registered Agent

CORPORATION INFORMATION SERVICES, INC.
1201 HAYS ST.
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. [illegible]

SIGNATURE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: PD	Title: PD ☒ Change ☐ Addition
Name: CADDIE, IAN S	Name: FEHER, ARTHUR S.
Street Address: 1085 W. MORSE BLVD.	Street Address: 1964 Howell Branch Road Suite 110
City-St-Zip: WINTER PARK FL 32789	City-St-Zip: Winter Park, FL 32792
Title: VSTD	Title: VSTD ☒ Change ☐ Addition
Name: FEHER, GENE P	Name: FEHER, GENE P.
Street Address: 1085 W. MORSE BLVD.	Street Address: 1964 Howell Branch Road Suite 110
City-St-Zip: WINTER PARK FL 32789	City-St-Zip: Winter Park, FL 32792
Title	Title ☐ Change ☐ Addition
Name	Name
Street Address	Street Address
City-St-Zip	City-St-Zip
Title	Title ☐ Change ☐ Addition
Name	Name
Street Address	Street Address
City-St-Zip	City-St-Zip
Title	Title ☐ Change ☐ Addition
Name	Name
Street Address	Street Address
City-St-Zip	City-St-Zip
Title	Title ☐ Change ☐ Addition
Name	Name
Street Address	Street Address
City-St-Zip	City-St-Zip

14. [illegible]

SIGNATURE: Gene P. Feher (signature) Gene P. Feher — 5-1-95 — 407 6795545
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0046710 CP

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APPROVED AND FILED

95 MAY 15 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000005347 (7)

1. Corporate Name
EDELWEISS DELICATESSEN, INC.

Principal Place of Business: 40 E. OCEAN BLVD. STUART FL 34994

Mailing Address: 40 E. OCEAN BLVD STUART FL 34994

3. Date Incorporated or Qualified: 01/21/1994

3a. Date of Last Report

2. Principal Place of Business | 2a. Mailing Address

Suite, Apt. #, etc. | Suite, Apt. #, etc.

City & State | City & State

Zip | Country | Zip | Country

4. FEI Number: 65-0461602 — Applied For / Not Applicable

5. Certificate of Status Desired — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
FREY, KRYSTYNA 40 E. OCEAN BLVD. STUART FL 34994	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSD	☐ Change ☐ Addition
NAME	FREY, KRYSTYNA	
STREET ADDRESS	40 E. OCEAN BLVD.	
CITY-ST-ZIP	STUART FL 34994	
TITLE	VT	☐ Change ☐ Addition
NAME	BAR, KURT	
STREET ADDRESS	40 E. OCEAN BLVD.	
CITY-ST-ZIP	STUART FL 34994	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on the 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.

SIGNATURE: Kurt Bar [signature] — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5.15.95 — 407-2836590

0381050 CP