05-10-1999 90046 011 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9400004997

1. Corporation Name

GREAT BUNS, INC.

Principal Place of Business Mailing Address					-	ila sa ni sa in s	IBAT IBNO (IBORI CEBO REBO
3816 MANATEE AVENUE W.		3816 MANATEE AVENUE WEST						
BRADENTON FL 34205		BRADENTON FL 34205 US			20.027.000	~~	~~	
US				DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualifed			
2. Principal Place of Business		2- Mailing Address			01/20/1994 4. FEI Number		T Apr	plied For
, ·		2a. Mailing Address			65-0473833			t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.					dditional	
22		27		5. Certifcate of Status Desired		Fee Red		
City & State		City & State		6. Election Campaign Financing		5.00	May Be	
23		28 .			Trust Fund Contribution		Added to	o Fees
Zip	Country	Zip	Country		8. This corporation owes the curr			_
24	25	29 30	<u>) </u>		Personal Property Tax.	<u>ভা</u>		□No
	9. Name and Address of Current F	Registered Agent			10. Name and Address of New F	Registered Ager	<u>1t</u>	
LIILL BOLIC			81	Name DC	oua Hill			
HILL, DOUG			82	Street Addres	ss (P.O. Box Number is Not Accepta	able)		
8459-1 GARDEN CIRCLE SARASOTA FL 34243				145 V	Nest River Roc	id #37		,
3Hrv	1501A FL 34243		83					II.
			84	City	mester	PH 85		Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above					ration submits this statement for the	ourpose of chan	ging its r	registered
office or re	egistered adent/ or both, in the State of	Florida. Such change was auth	iorized by th	ne corporation	n's board of directors. I hereby accep	ot the appointme	nt as reg	jistered
agent. I am familiar with, and accept the obligations of, Sestion 607.0505, Florida S			i I			4/2919	9	
SIGNATURE //// Signature, typed or printed name of legistered agent and title if applicable. (NOTE: Regard)			gistered Agent s	signature required v		DATE		*****
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OF	FICERS AND D	RECTO	
TITLE	PSTD	☐ DELETE	1,1 TITLE				Change	☐ Addition
NAME	HILL, DOUG		1.2 NAME					
STREET ADDRESS 3816 MANATEE AVENUE WEST			1.3 STREET ADDRESS					
CITY-ST-ZIP	BRADENTON FL 34205		1.4 CITY-ST-2	ZIP				
TITLE	☐ DELETE 2.1		2.1 TITLE	_			Change	☐ Addition
NAME	2.2		2.2 NAME					
STREET ADDRESS			2.3 STREET A	ODRESS				
CITY-ST-ZIP			2. 4 CITY-ST	·ZIP				
TITLE		☐ DELETE	3.1 TITLE			Ш.	Change	Addition \
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET A	ODRESS				į
CITY-ST-ZIP		<u> </u>	3.4. CITY-ST	ZIP				
TITLE		DELETE	4.1 TITLE				Change	Addition
NAME ,	•		4. 2 NAME					I
STREET ADDRESS	î t		4.3 STREET A	JDDRESS				
CITY-ST-ZIP			4.4 CITY-ST-2	ZIP			<u></u>	
TITLE		☐ DELETE	5.1 TITLE			Li	Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET A	1				
CITY-ST-ZIP		···	5.4 CITY-ST-2	ZIP				
THILE		☐ DELETE	6.1 TITLE			البا	Change	☐ Addition
NAME			6.2 NAME					

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 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP