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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P9400008628

HOLLYWOOD FINE PASTRY, INC.

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Principal Place of Business*	Mailing Address	
1111 S 30TH AVE SUITE 600 HOLLYWOOD FL 33020 US	1111 S 30TH AVE SUITE 600 HOLLYWOOD FL 33020 US	

FILED Feb 01, 1999 8:00am **Secretary of State**

02-01-1999 90048 045 ***150.00



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/25/1994 Mailing Address 4. FEI Number Applied For 26 65-0468962 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certifcate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zio Country Zip Country 8. This corporation owes the current year Intangible 25 29 30 Personal Property Tax. X Yes □No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name MARK COHEN, ESQ. 4651 SHERIDAN STREET STE 300 Street Address (P.O. Box Number is Not Acceptable) SUITE 600 83 HOLLYWOOD FL 33021 在南地域的中等 8 City

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.

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Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registerel Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TILE ☐ Change STREETER, JOHN F NAME 1.2 MME 1113 S 30TH AVE STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL 1.4 CTY-ST-ZIP TITLE ☐ DELETE 2.1 TILE ☐ Change ☐ Addition NAME 2.2 MME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4:ITY-ST-ZIP TITLE □ DELETE 3.1 TLE ☐ Change ☐ Addition NAME 3.2 AME "数字" STREET ADDRESS 3.3 SREET ADDRESS CITY-ST-ZIP 3.4. (TY-ST-ZIP TITLE ☐ DELETE 4.1 TLE Change ☐ Addition NAME 4. 2 AME STREET ADDRESS 4.3 TREET ADDRESS CITY-ST-ZIP 4.4 CTY-ST-ZIP TITLE ☐ DELETE 5.1 TILE ☐ Change ☐ Addition NAME 5.2 NME 5.3 SREET ADORESS STREET ADDRESS CITY-ST-ZIP 5.4 CTY-ST-ZiP TITLE DELETE 6.1 TILE ☐ Change ☐ Addition NAME 6.2 NME STREET ADDRESS 6.3 SREET ADDRESS CITY-ST-ZIP 6.4 dry-ST-ZIP

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 tyle and accorde 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 depression of the receiver or trustee depression of the receiver of the same legal effect as if made under oath; that I am an Block 12 or Block 13 if changed or on any attachment with an address, with all other ite empowered.

SIGNATURE:

NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)