SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400008760 (8)

ROSEMARY'S HALLMARK INC.

FILED Sep 17 1997 8:00am Secretary of State



Principal Place of Business		Mailing Address				
3555 NO. LECANTO HWY. BEVERLY HILLS FL 34465		3555 NO. LECANTO HWY	·.			
		BEVERLY HILLS FL 3446				
					DO NOT WRITE 3. Date Incorporated or Qualified	
						3a. Date of Last Report
2. Principal P	lace of Business	2a. Mailing Address			01/25/1994 4. FEI Number	05/01/1996 Applied For
21		26			59-3228909	Not Applicat
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CO 75 4 4 (1) 1 1 1
22		27			5. Certificate of Status Desired	Fee Required
City & State	е	City & State			6. Election Campaign Financing	\$5.00 May 8e
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Ζιρ	Coi	untry	8. This corporation owes or has pa	id the current year Intangible
24	25	29	30		Personal Property Tax due June	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Re	gistered Agent
KAD)ACINSKI, JOSEPH			81 Name	KABACINSKI T	Taleph P.
1684 EAST MCKINLEY ST.				82 Street	Address (P.O. Box Number is Not Acceptab	
" HERNANDO FL 32642					1684 EAST 1	ue Finter St
				83		
	/			84 City		85 Zin @ 16/16
					TERPANDO	FL 3777
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statu	tes, the a	bove-named	corporation submits this statement for the p	urpose of changing its registere
agent. La	m familiar with, and accept in object	ation, of Section 607,050 FI	orida Sta	ta by the cor tutes:	poration's boiled of directors. Hereby accep	or the appointment as registered
SIGNATURE	/ / / / / / / / / / / / / / / / / / / /	Wacush			7/12/94	
CIGITATORE	Signature, li ped or printed name of registered age-		L: flogisterd	d Agent signaturi	e required where reinstating)	DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE	
TITLE	D	☐ DELETE	1.17	ITLE		Change 🔲 Additi
NAME	KABACINSKI, JOSEPH		1.2 N	AME		
STREET ADDRESS	1684 EAST MCKINLEY ST.		1.3 S	TREET ADDRESS	16000 1 11 211	///_
CITY-ST-ZIP	HERNANDO FL 32642			ITY-ST-ZIP	Hernando, FL 344	42
TITLE	D	☐ DELETE	2.1 T	TLE	Hernando, FL 344 Hernando FL 34	Change Additi
NAME	KABACINSKI, ROSEMARY		22 N	IAME	1	
STREET ADDRESS	1884 EAST MCKINLEY ST.		2.3 \$	TREET ADDRESS	1/2-11 1 51 21	1111
CITY-ST-ZIP	HERNANDO FL 32642		2.41	CHTY-ST-ZIP	Hernando FL 34	442
TITLE		☐ DEL€1 €	3.1 T	111.6		Change Additi
NAME			3.2 N	AME		
STREET ADDRESS			3.3 S	TREET ADDRESS		
CITY-ST-ZIP		·	3.4. 0	CITY - ST - ZIP		
TITLE		DELETE	4.1 T	ITLE		☐ Change ☐ Acditi
NAME			4.21	NAME		
STREET ADDRESS			4.3 S	TREET ADDRESS		
CITY-ST-ZIP			4.4 0	ITY-ST-ZIP		
TITLE		DELETE	5.1 T	ITLE		☐ Change ☐ Additi
NAME			5.2 N	AME		/A . \W
STREET ADDRESS			5.3 S	treet address		V() ('V)
CITY-ST-ZIP			5.4 C	(1Y-\$1-2IP		<i>σ//, ,</i>
TITLE		☐ DELETE	6.1 7			☐ Change ☐ Additi
NAME			6.2 N	AME.	40000229	8624
STREET ADDRESS		•	6.3 S	TREET ADDRESS	-09/19/970110	16035
CITY-ST-ZIP			6.4 0	ITY-ST-ZIP	***550.00	
	by cartify that the information supplied	with this filing does not qual			stated in Section 119.07(3)(i). Florida Statutes	I further certify that the

on 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 is true and accurate and that my signature shall have the same legal effect as if made under earlr; that I am an officer or director of the coloration or the receiver or true is empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block is it hanged, or or an exact mention and direction.