

FILE NOW: FILING FEE AFTER MAY 1ST IS \$55

FILED
Apr 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF Sandra B. Morthw Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000014514 (1)

1. Corporation Name
THE GOURMET PEDDLER, INC.

Principal Place of Business

831 BRENTWOOD DR.
APOPKA FL 32712

Mailing Address

831 BRENTWOOD DR.
APOPKA FL 32712



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/22/1994

4. FEI Number

59-3236864

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

LOPEZ, R. LARRY
831 BRENTWOOD DR.
APOPKA FL 32712

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the 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 Stat.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
D LOPEZ, R. LARRY
STREET ADDRESS
831 BRENTWOOD DR.
CITY-ST-ZIP
APOPKA FL 32712

TITLE ☐ DELETE

NAME
D LOPEZ, CANDACE
STREET ADDRESS
831 BRENTWOOD DR.
CITY-ST-ZIP
APOPKA FL 32712

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE

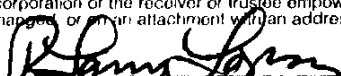
6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-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 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 in an attachment with an address.

SIGNATURE:



4/20/98 (407) 886-5234

Date

Daytime Phone # 0081079

CR2E034 (10/97)