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PROFIT CORPORATION ANNUAL REPORT

1997



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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 11 1997 8:00am Secretary of State

M & J DONUTS # 6, INC.							
Principal Place of Business 18714 NW 67TH AVE. MIAMI FL 33015 US	Mailing Address 18714 NW 67TH AVE. MIAMI FL 33015-2408 US	18714 NW 67TH AVE. MIAMI FL 33015-2408				31611 17 3 11 7 101	(63) (63)
				3. Date Incorporated or Qualified 02/22/1994	1	ate of Last R 16/1996	eport
2. Principal Place of Business	2a. Mailing Address			4. FEI Number			plied For
21	26			65-0488089			ot Applicable
Suite, Apt. #, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	Additional equired
City & State	City & State			6. Election Campaign Financing			
23	28			Trust Fund Contribution		\$5.00 Added	
Zip Country	Ζψ	Cour	ntry	8. This corporation has liability for	or intendible		
24 25	29	30		Florida Statutes	Yes [,
9. Name and Address of Cur	rrent Registered Agent			10. Name and Address of New	Registered	Agent	
CAPOTE, BEATRIZ M	_	<u> </u>	81 Name •				
1110 BRICKELL AVE., 7TH FLOO MIAMI FL 33131	R	82 Street Ad		dress (P.O. Box Number is Not Accept	table)		
		ſ	83				
		Ì	84 City	<u></u>	FL	85 Zip	Code
			l				s registered
11. Pursuant to the provisions of Sections 607, office or registered agent, or both, in the S	0502 and 607.1508, Florida Stat tate of Florida, Such change was	utes, the ab	ove-named cor by the corpora	rporation submits this statement for the ation's board of directors. I hereby acc	e purpose of cept the app	r changing ii pointment as	registered
Pursuant to the provisions of Sections 607 office or registered agent, or both, in the Sagent Tam familiar with, and accept the of	0502 and 607.1508, Florida Stat tate of Florida. Such change was bligations of, Section 607.0505, I	utes, the ab s authorized Florida Statu	ove-named cor by the corpora ites.	rporation submits this statement for the ation's board of directors. I hereby acc	e purpose of cept the app	r changing ii pointment as	registered
PRITARBIS						oointment as	registered
SIGNATURE Spectre, typert or profest name of response				rporation submits this statement for the ation's board of directors. I hereby accurred when reinstating) ADDITIONS/CHANGES TO OF	DATE		
SIGNATURE Signature, typerfor punited name of regiones 12. OFFICERS INTEL P	d agont and title if applicable (N	OTE Registered	Agent signature requ	urred when reinstating)	DATE		
SIGNATURE Special transport or provided manus of registeres 12. OFFICERS THE P LAME SANTOS, MARIANO	d agont and tille if applicable (N	OTE Registered	Agent signature requ	urred when reinstating)	DATE	DIRECTOR	IS IN 12
SIGNATURE 12. OFFICERS 111: P SANTOS, MARIANO 18714 NW 67TH AVE.	d agont and tille if applicable (N	OTE Registered 13. 11 TIT	Agent signature requ	urred when reinstating)	DATE	DIRECTOR	IS IN 12
SIGNATURE	d agencie at take if applicable (N AND DIRECTORS DELETE	OTE Registered 13. 11 TUT 1.2 NA	Agent signature requ	urred when reinstating)	DATE	D DIRECTOR	IS IN 12
SIGNATURE	d agont and tille if applicable (N	OTE Registered 13. 11 T/T 1.2 NAI 1.3 ST/ 1.4 C/T 2.1 T/T	Agent signature requ	urred when reinstating)	DATE	DIRECTOR	IS IN 12
SIGNATURE	d agencie at take if applicable (N AND DIRECTORS DELETE	OTE Registered 13. 11 TIT 1.2 NAI 1.3 STI 1.4 CIT 2.1 TIT 2.2 NAI	Agent signature requirements LE ME REET ADDRESS Y-ST-ZIP LE ME	urred when reinstating)	DATE	D DIRECTOR	IS IN 12
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