FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 MAY -1 PM 01:09

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****200.00 ****200.00

DOCUMENT # P94000054673

1. Corporation Name
DEBRON, INC.

Principal Place of Business
SAM'S DELI III
7203 Bryan Dairy Road
Largo, FL 34647

Mailing Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 7-22-94
3a. Date of Last Report: 7-22-94

2. Principal Place of Business — 21
2a. Mailing Address — 26
4. FEI Number: 59-3255976 — Applied For / Not Applicable

Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

City & State — 23
City & State — 28
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

Zip — 24 / Country — 25
Zip — 29 / Country — 30
8. The corporation has liability for intangible tax under § 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

RONNIE E. EISEN
NEW ADDRESS →

10. Name and Address of New Registered Agent

01 Name: RONNIE EISEN
02 Street Address (P.O. Box Number is Not Acceptable): 10506 Shady Oak Ln.
03
04 City: SEMINOLE — FL — 05 Zip Code: 34647

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.

SIGNATURE: Ronnie Eisen — 4/27/95
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating. DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE		11 TITLE	P/T	☐ Change ☑ Addition
NAME		12 NAME	RONNIE E. EISEN	update
STREET ADDRESS		13 STREET ADDRESS	10506 Shady Oak Ln.	
CITY ST ZIP		14 CITY ST ZIP	SEMINOLE, FL 34647	
TITLE		21 TITLE	V/S	☐ Change ☑ Addition
NAME		22 NAME	DEBRA A. EISEN	Update
STREET ADDRESS		23 STREET ADDRESS	10506 Shady Oak Ln.	
CITY ST ZIP		24 CITY ST ZIP	SEMINOLE, FL 34647	
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY ST ZIP		34 CITY ST ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 above, or on an attachment with an asterisk.

SIGNATURE: Ronnie Eisen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Title — Daytime Phone #