

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Shirley B. Mumlan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000060526 (8)

1. Corporation Name

BAGEL MAN, INCORPORATED

Principal Place of Business

7043 4TH ST. NORTH
ST PETERSBURG FL 33702

Mailing Address

7043 4TH ST. NORTH
ST PETERSBURG FL 33702



2. Principal Place of Business

21

Suite, Apt. #, etc.

3244 44TH AVE N

City & State

ST. PETE, FL

Zip

33714

Country

U.S.A.

2a. Mailing Address

26

Suite, Apt. #, etc.

3244 44TH AVE N

City & State

ST. PETE, FL

Zip

33714

Country

U.S.A.

9. Name and Address of Current Registered Agent

CUCCARO KURT
5108 WHITE PINE CIR NE
SUITE 4
ST PETERSBURG FL 33709

3. Date Incorporated or Qualified

08/17/1994

3a. Date of Last Report

03/15/1995

4. FEI Number

59-3270832

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 has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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

12. OFFICERS AND DIRECTORS

TITLE

DP

NAME

CUCCARO, KURT

STREET ADDRESS

5108 WHITE PINE CIRCLE

CITY-STATE-ZIP

ST PETERSBURG FL 33703

TITLE

DV

NAME

CURCCARO, MARY

STREET ADDRESS

5108 WHITE PINE CIR. NE

CITY-STATE-ZIP

ST. PETERSBURG FL 33703

TITLE

DV

NAME

CINDY CUCCARO

STREET ADDRESS

3244 - 44TH AVE N

CITY-STATE-ZIP

ST. PETE FL. 33714

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

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CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-STATE-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-STATE-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-STATE-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-STATE-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-STATE-ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY-STATE-ZIP

29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY-STATE-ZIP

33. TITLE

34. NAME

35. STREET ADDRESS

36. CITY-STATE-ZIP

VP

CINDY CUCCARO

3244 - 44TH AVE N

ST. PETE FL. 33714

☐ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/26/96

CR2E034 (12/95)