FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400067051 (0)

DAVE MITCHELL'S GRAND CENTRAL, INC.

FILED Jun 03 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 1812 E. BUSCH BLVD. TAMPA FL 33612 TAMPA FL 33612					
				Date Incorporated or Qualifie 09/08/1994	d 3a. Date of Last Report 04/10/1996
2. Principal P	Place of Business	2a. Mailing Address		# ECIAL miles	3 2 6 6 6 0 Applied For Not Applicable
Suite, Apt.	#, efc.	Suite, Apt. #, etc.	E-7	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	te	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25		Country 30	Florida Statutes	or intangible tax under s. 199 032,
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New	
4 01-	IZALEZ, ENRICO G E: KENNEDY BLVD. PA FL 33802	ange 1 gent den	82 Street Ac 83	JEM Mitche dress (P.O. Box Number is Not Accept L Busen	જામ પ્ર
		7000	84 -ein	b A	FL 85 Zp Code 336/2-
l office or i	to the provisions of Sections 607.0 registered agent, or both, in the Sta am familiar with, and accept the obl	ite of Florida. Such chancio was a	es, the above-named could be corporated by the corporate t	orporation submits this statement for the ation's board of directors. I hereby acc	e purpose of changing its registered
SIGNATURE	Signature, typed or printed name of registered a	R_CC (NOTE	Begistered Agent signature rec		5-24-97 DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
TITLE	DPV	☐ DELETE	1110LE		Change Addition
NAME	MITCHELL, DAVID		1.2 NAME		
STREET ADDRESS	1812 E. BUSCH BLVD. TAMPA FL 33612		1.3 STHEET ADDRESS		
CITY-ST-ZIP TITLE	ST ST	DELETE	1.4 CITY - ST - 7IP 2.1 TITLE		Change Addition
NAME	MITCHELL, DAVID		2.2 NAME		
STREET ADDRESS	1812 E. BUSCH BLVD.		2.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33612		2 4 CITY - ST - ZIP		
TITLE		☐ DELETE	31 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS	:	
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - \$T - ZIP 4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		ł
STREET ADDRESS			5.3 STREET ADDRESS		ŀ
CITY-ST-ZIP		DELETE	54 CITY - ST - 7IP		Change Addition
title Name		L_ DELETE	61 TIFLE 62 NAME		L_1 Onlarige
NAME STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-S1-ZIP		
Sitt - Ot - Til	L		LE CHANTI SITEIL		

14. I do hereby certify that the information supplied with this filling 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 tegal 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 on an alternment with an address.