

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Building B, Northside
New Century II State
Division of Corporations

DOCUMENT # P94000085311 (6)

1. Corporation Name:

BROOKLYN BAGELS, INC.

**APPROVED
AND
FILED**

95 MAY -1 PM 1:52

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business:

**941 WASHINGTON AVE.
MIAMI BEACH FL 33139**

Mailing Address:

**941 WASHINGTON AVE.
MIAMI BEACH FL 33139**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

11/22/1994

3a. Date of Last Report

4. Fict Number

65 0547458

Applied For

Not Application

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

7. This corporation has adopted the uniform rules for Florida Statutes
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business:

21

2a. Mailing Address:

26

State Apt. # etc.

State Apt. # etc.

City & State

City & State

24

25

29

30

9. Name and Address of Current Registered Agent

**LEVINSON, EDWARD E
407 LINCOLN ROAD - PH-SE
MIAMI BEACH FL 33139**

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 607.01(2) and 607.01(3) Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to the address specified in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept this appointment as registered agent. I am familiar with and accept the obligations of Sections 607.01(2) Florida Statutes.

SIGNATURE

(Print Name of Agent or Agent's Representative)

(Print Name of Agent or Agent's Representative)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN:

NAME	DPST
NAME	FURMAN, BERNARD
STREET ADDRESS	941 WASHINGTON AVE.
CITY	MIAMI BEACH FL 33139
NAME	
STREET ADDRESS	
CITY	
NAME	
STREET ADDRESS	
CITY	
NAME	
STREET ADDRESS	
CITY	
NAME	
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NAME	
STREET ADDRESS	
CITY	

1. NAME		☐ Change ☐ Addition
2. STREET ADDRESS		
3. CITY		
4. NAME		☐ Change ☐ Addition
5. STREET ADDRESS		
6. CITY		
7. NAME		☐ Change ☐ Addition
8. STREET ADDRESS		
9. CITY		
10. NAME		☐ Change ☐ Addition
11. STREET ADDRESS		
12. CITY		
13. NAME		☐ Change ☐ Addition
14. STREET ADDRESS		
15. CITY		

14. I hereby certify that the information provided with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 607.01(2) and 607.01(3) Florida Statutes. I further certify that the information provided in this annual report or subsequent 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 person or persons empowered to file this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1, or Block 4, or both, of this report, or on an affidavit sworn to with an affidavit.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR