FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

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

ENTERED MAR 1 4 1996

DOCUMENT # P95000023688 (1)

1. Corporation Name
JEFF'S DESSERTS, INC.

Principal Place of Business	Mailing Address
601 BAYSHORE BLVD. SUITE 700 TAMPA FL 33606	601 BAYSHORE BLVD. SUITE 700 TAMPA FL 33606

ENTERED MAR

2. Principal Place of Business	2a. Mailing Address
21 5600 Gulf Blvd.	26 5600 Gulf Blvd.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 St. Pete Beach, FL 33706	City & State 28 St. Pete Beach, FL 33706
Zip 24 33706 — Country 25	Zip 29 33706 — Country 30

3. Date Incorporated or Qualified: 03/23/1995
3a. Date of Last Report:
4. FEI Number: 59-3308512 ☐ 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

9. Name and Address of Current Registered Agent

RADKE, RICHARD W
601 BAYSHORE BLVD.
SUITE 700
TAMPA FL 33606

10. Name and Address of New Registered Agent

81 Name: Sheryl H. Andrews
82 Street Address (P.O. Box Number is Not Acceptable): 5600 Gulf Blvd.
83
84 City: St. Pete Beach FL 85 Zip Code 33706

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 [signature] — Signature, typed or printed name of registered agent and title if applicable — (NOTE: Registered Agent signature required when reinstating) [signature] 3/5/96 DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	SHERMAN, RICHARD E	
STREET ADDRESS	5600 GULF BLVD.	
CITY-ST-ZIP	ST. PETERSBURG BEACH FL 33706	
TITLE	D	☐ DELETE
NAME	GIVENS, JEFFREY	
STREET ADDRESS	310 DAVENPORT ROAD	
CITY-ST-ZIP	TORONTO ONTARIO M5R IK6	
TITLE	D	☐ DELETE
NAME	BARNEY, TOM	
STREET ADDRESS	5600 GULF BLVD.	
CITY-ST-ZIP	ST. PETERSBURGF BEACH FL 33706	
TITLE	D	☐ DELETE
NAME	BAUERSACHS, BOB	
STREET ADDRESS	5600 GULF BLVD.	
CITY-ST-ZIP	ST. PETERSBURGF BEACH FL 33706	
TITLE	D	☐ DELETE
NAME	TOTH, DREW	
STREET ADDRESS	5600 GULF BLVD.	
CITY-ST-ZIP	ST. PETERSBURGF BEACH FL 33706	
TITLE		☐ DELETE
NAME	6-698-7104	
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D P	☒ Change ☐ Addition
1.2 NAME	Sherman, Richard E.	
1.3 STREET ADDRESS	5600 Gulf Blvd.	
1.4 CITY-ST-ZIP	St. Pete Beach FL 33706	
2.1 TITLE	D CEO	☒ Change ☐ Addition
2.2 NAME	Givens, Jeffrey	
2.3 STREET ADDRESS	310 Davenport Road	
2.4 CITY-ST-ZIP	Toronto Ontario M5R 1K6 Canada	
3.1 TITLE	D V S T	☒ Change ☐ Addition
3.2 NAME	Barney, Tom	
3.3 STREET ADDRESS	5600 Gulf Blvd.	
3.4 CITY-ST-ZIP	St. Pete Beach, FL 33706	
4.1 TITLE	D	☒ Change ☐ Addition
4.2 NAME	Bauersachs, Bob	
4.3 STREET ADDRESS	5600 Gulf Blvd.	
4.4 CITY-ST-ZIP	St. Pete Beach, FL 33706	
5.1 TITLE	D	☒ Change ☐ Addition
5.2 NAME	Toth, Drew	
5.3 STREET ADDRESS	5600 Gulf Blvd.	
5.4 CITY-ST-ZIP	St. Pete Beach, FL 33706	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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4-11-96

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)(k), 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 if changed, or on an attachment with an address.

SIGNATURE: [signature] — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — 3/5/96 Date — (813) 562-1221 Daytime Phone #

CR2E034 (12/95)