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CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000023688 (1)

JEFF'S DESSERTS, INC.

| Principal | Plac | e of | Busi | ness |
|-----------|------|------|------|------|

Mailing Address

5800 GULF BOULEVARD

FILED Apr 25 1997 8:00am Secretary of State



| ST-PETEROBURG-BEACH FL 99796 | | ST PETERSBURG BEACH FL 33706-2248 | | | | | | | |
|------------------------------|--|-----------------------------------|--------------|-------|--|--|--------------------|---------------|------------------------|
| | | | | | 03/23/1995 04/ | | ate of Last Report | | |
| | Place of Business | 2a. Mailing Address | | | | 4. FEI Number | - | A | pplied For |
| | Currie Davis Dr. | 26 | | | | 59-3308512 | | | lot Applicable |
| Sulte, Apt. | #, etc. | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | | Additional lequired |
| City & Stat | City & State City & State | | | | 6. Election Campaign Financing \$5.00 May Be | | | | |
| 23 Tamy | | 28 | ., | | | Trust Fund Contribution | | Added | to Fees |
| Zip | Country | Zip | Con | ntry | | 8. This corporation has liability for i | | | s. 199.032, |
| 24 336 / | | 29 | 30 | | | Florida Statutes 10. Name and Address of New Re | Yes . | | |
| 4110 | 9. Name and Address of Current | Hegisterea Agent | | 81 | Name | 10. Name and Address of New He | gisterea Ag | ent | |
| | REWS, SHERYL H | | | ٠' | INATIC | | | | |
| | GULF BOULEVARD | | | 82 | Street Add | dress (P.O. Box Number is Not Acceptab | le) | | |
| 81 F | PETERSBURG BEACH FL 33706 | | | 83 | | | | | |
| | | | | " | | | | | |
| | | | | 84 | City | | FL | 85 Zip | Code |
| | 10-11-07-07-07-07 | 1 1 007 11 00 Fb 12 Ob- | | | l | the state of the s | | | ita sassintas al |
| office or r | registered agent, or both, in the State of amiliar with, and accept the obligations. | of Florida. Such change was | s authorized | d by | the corpora | rporation submits this statement for the p ation's board of directors. I hereby accep | it the appoir | ntment as | registered |
| SIGNATURE | | | | | | | | | |
| | Signature, typed or printed name of registered ager | | | d Age | rit signature req | uired when reinstating) | DATE. | VIDEOTO | DC (N. 40 |
| 12. | OFFICERS AND | DELETE | 13. 1.1.1 | | Т | ADDITIONS/CHANGES TO OFFIC | | Change | Addition |
| TITLE | SHERMAN, RICHARD E | ענווונ ביי | | | | | L |] Change | ☐ Addition |
| NAME | 5600 GULF BLVD. | | 1.2 NA | | 11:00:00 | | | | |
| STREET ADDRESS | ST. PETERSBURG BEACH FL 3 | 3708 | | | ADDRESS | | | | |
| CITY-ST-ZIP | DOEO | DELETE | 2.1 Tri | | ST-ZIP | | | Change | Addition |
| NAME | GIVENS, JEFFREY | been | 2.2 N/ | | | | <u>_</u> | J Change | |
| STREET ADDRESS | 310 DAVENPORT ROAD | | | | ADDRESS | | | | |
| CITY-ST-ZIP | TORONTO ONTARIO M5R IK6 | | | | ST - ZIP | | | | |
| TITLE | DVST | DELETE | 3.1 10 | |)1 - Z(F | | | Change | Addition |
| NAME | BARNEY, TOM | | 3.2 NA | | | | | | _ |
| STREET ADDRESS | 5600 GULF BLVD. | | E | | ADDRESS | | | | |
| CITY-ST-ZIP | ST. PETERSBURG BEACH FL 3 | 3706 | F | | ST-ZIP | | . 1 | | |
| TITLE | D | DELETE | 4.1 10 | | 31-20 | | E | Change | Addition |
| NAME | BAUERSACHS, BOB | | 4.2 N | AME | | | | | |
| STREET ADDRESS | 5600 GULF BLVD. | | 43.51 | BEE1 | ADDRESS | | <u> </u> | : | |
| CITY-ST-ZIP | ST. PETERSBURG BEACH FL 3 | 3706 | | | ST-ZIP | | | | |
| TITLE | D | ☐ DELFTE | 5.1 10 | | , , | | | Change | Addition |
| NAME | TOTH, DREW | | 5.2 N/ | MF | | | | | |
| STREET ADDRESS | 5600 GULF BLVD. | | | | ADDRESS | | 1 | • | |
| CITY-ST-ZIP | ST. PETERSBURG BEACH FL 3 | 3706 | 5.4 CI | IY-S | 1-2IP | | | | |
| TITLE | | DELETE | 6.1 70 | | | | | Change | Addition |
| NAME | | | 6.2 N/ | AME | | | i, | | |
| STREET ADDRESS | | | | | ADDRESS | | | | |
| CITY-\$T-ZIP | | | 6.4 CI | | | | | | |
| | | | | | | | | | |

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information indicated on this emulai 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 of the receiver returned empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an ottach lent with an address.