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

PROFIT CORPORATION ANNUAL REPORT 1997

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000043155 (7)

BRADY'S BUTCHER BLOCK & DELI, INC.

<u>.</u>					
Principal Place of Business Mailing Address				a indikana iyo indol birii bajii bajii golii qolii golii birii birii birii birii birii birii birii birii birii	
323 SE PT. ST. LUCIE BLVD. 4421 NW 6TH PT. ST. LUCIE FL 34994 COCONUT CF					
PI. SI. LUCIE US	FL 34904	COCONUT CREEK FL 3306	6-1521		
				3. Date Incorporated or Qualified 3a. Date of Last Report	
2. Principal F	Place of Business	2a. Mailing Address	****	05/31/1995 05/01/1996 4. FELNumber Applied For	
21		26 323 SE A	t St Lucic Bl	4. FEI Number Applied For Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		\$8.75 Additional	
22		27		5. Certificate of Status Desired Fee Required	
City & Stat	le	City & State	. 1	6. Election Campaign Financing \$5.00 May Be	
23		28 YOUT STL	ucie, Fl	Trust Fund Contribution	
Zip	Country	To Journal	Country	8. This corporation has liability for intangible tax under s. 199.032,	
24	25 g, Name and Address of Curre	29 <i>ン</i> ケフ&リ	30 St Lucic	f lorida Statutes Yes No	
		ut neðisteien Aðeilt	81 Namo	10. Name and Address of New Registered Agent	
	ADY, JAMES J.				
	SE PT. ST. LUCIE BLVD. RT ST LUCIE FL 34984		82 Street Addi	ress (P.O. Box Number is Not Acceptable)	
PUF	11 31 LUCIE PL 34904		83		
			84 City	FL B5 Zip Code	
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statute	es, the above-named corp	poration submits this statement for the purpose of changing its registered	
OTTICE OF I	registered agent, or both, in the State am familiar with, and accept the oblic	eof Florida. Such change was a	uthorized by the corporat	tion's board of directors. I hereby accept the appointment as registered	
SIGNATURE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Treat Citations.		
OIGHATOTIE	Signature, typed or printed ranks of registered ag		. Registered Agent signature requir	red where reinstating) DATE	
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP LANGE UE	LJ DECETE	1.1 101.(] Change Addition	
NAME OTREET ARRESTO	BRADY, JAMES J.IE		1.2 NAME		
STREET ADDRESS CITY-ST-ZIP	323 SE PT. ST. LUCIE BLVD. PORT ST. LUCIE FL		1.3 STREET ADDRESS		
TITLE	DST	DELETE	1.4 CHY - S1 - ZIP 2.1 HTLE	Change Addition	
NAME	BRADY, NANCY		2.2 NAME	Change Rounion	
STREET ADDRESS	323 SE PT. ST. LUCIE BLVD.		2.3 STREET ADDRESS		
CITY-ST-ZIP	PORT ST. LUCIE FL		2. 4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE	Change Addition	
NAME			3.2 NAME		
STREET ADDRESS			3 3 STHEET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-7IP		
TITLE		☐ DELETE	4.1 11TUF	Change Addition	
NAME		•	4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		Fig.Fig.	4.4 CHY-ST-7IP		
TITLE		☐ DELETE	5 1 TITLE	Change Addition	
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DECETE	5.4 CHY-ST: 7IP 6.1 TITLE	Change Addition	
NAME			G.2 NAME	L. Glange L. Austron	
STREET ADDRESS			G.3 STREET ADDRESS		
			= 0.0 0 HILL I MIZPHLOD		

6.3 STREET ADDRESS

6.4 CITY - ST- ZIP 14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal offect as if made under eath, 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.