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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

**SIGNATURE:** 



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 01 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000062732 (9)

IVY'S CAFE & DELI COMPANY

975 IMPERIAL GOLF COURSE BLVD. UNIT 101			975 IMPERIAL GOLF COURSE BLVD. UNIT 101							
NAPLES FL 339	942		NAPLES FL 3	14110-1087			3. Date Incorporated or Qualified 08/15/1995	3a. Date of Le 08/08/199		
2. Principal Place of Business			2a. Mailing A	2a. Mailing Address			4, FEI Number	1 33,03,13	Applied For	
21		26	26			65-0601334		Not Applicable		
Suite Apt #. etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State			City & St	City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zψ		Country	Zıp	Zip Country			8. This corporation has liability for	intangible tax und	der s. 199.032,	
24	25 29 30						Florida Statutes 🖫 Yes 🗌 No			
	9. Name and	Address of Curren	t Registered Age	ent			10. Name and Address of New Re	gistered Agent		
MCE	elrath, david	ESQ.			81	Name			ļ	
4001	i tamiami tra	IL NORTH, STE. 2	50		82	Street Ac	idress (P.O. Box Number is Not Acceptal	ole)		
NAPI	LES FL 34103						,			
					83					
					84	City		85	Zip Code	
					07	City		FL 🎳	zip Code	
11. Pursuant office or ragent 1 a	to the provisions registered agent, am familiar with, a	of Sections 607 050; or both, in the State ind accept the obliga	2 and 607.1508, I of Florida. Such o ations of, Section	Florida Statutes change was aut 607.0505, Florid	, the abov thorized b da Statute	e-named co y the corpo s.	orporation submits this statement for the ration's board of directors. I hereby acce	ourpose of chang pt the appointmen	ing its registered nt as registered	
SIGNATURE	Segnature hypodiocipin	nted name of registered age	ri and title if applicable	(NOTE: F	Registered Ag	ent signature re-	guired when reinstating)	DATE		
12.		OFFICERS AND	DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIREC	TORS IN 12	
TITLE	P			DELETE	1.1 TITLE			☐ Cha	ange Addition	
NAME	SKELLY, JOS				1.2 NAME					
STREET ADDRESS	975 IMPERIA	L GOLF COURSE	BLVD., #101		1.3 STREE	T ADDRESS				
CITY-S1-ZIP	NAPLES FL 3	3942			1.4 CITY-	ST-ZIP				
TITLE	ST			] DELETE	2.1 TITLE			☐ Cha	ange 🔲 Addition	
NAME	SKELLY, PAN			2:						
STREET ADDRESS		L GOLF COURSE	BLVD., #101	<b>VD., #101</b> 2.3 STREET ADD		TADDRESS				
CITY - S1 - ZIP	NAPLES FL 3	3942			2 4 CITY-	ST - ZIP				
TITLE			L	DELETE	3.1 TITLE			[] Cha	ange [_] Addition	
NAME					3.2 NAME	ŀ			Ì	
STREET ADDRESS						T ADDRESS				
C(IY+SI-7IP				DELETE	3.4. CITY-	ST-ZIP		T T ac	A A A A A A A A A A A A A A A A A A A	
TITLE			L	DELETE	4.1 TITLE	1		L] Cha	ange 🔲 Addition	
NAME					4. 2 NAME					
STREET ADDRESS					1	T ADDRESS				
CHY-ST-ZIP				DELETE	4.4 CITY-	ST-ZIP		T105-	ngo Addition	
TITLE			L	T OCCEPT.	5.1 TITLE			[] Cha	ange L Addition	
NAME	)				5.2 NAME	l.				
STREET ADDRESS	J					TADORESS				
CHY ST-76				DELETE	5.4 CITY -	51 - ZIP		Cha	ange Addition	
TITLE NUMBER			L	T DEFETIE	61 TITLE			i ∪ cus	nific Thynnitign	
NAME OTHERT ARMHERE					6.2 NAME	Į.				
STREET ADDRESS	]					T ADDRESS			ı	
14. Ldo beret	hy certify that the	information supplied	with this bling d	oes not qualify	6.4 CITY-		ted in Section 119.07(3)(i), Florida Statute	s I further certifu	that the	
informatio	on indicated on th	is annual report or s	uppiemental anno	ual report is true	e and acc	urate and th	nat my signature shall have the same leg- port as required by Chapter 607, Florida	al effect as if mad	le under oath; that	
appears i	in Block 12 or Blo	ck 13 if changed, or	on an attachmer	t with an addre	ISS.					

- OUISBERH B. SKELLY 4/24/97