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

**PROFIT CORPORATION** ANNUAL REPORT

**1998** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000071840 (9)

SILVER LAKES YOGURT, INC.

## **FILED** May 05 1998 8:00am Secretary of State



Principal Plac	ce of Business	Mailing Address			s considing the initiality onth Marie Object on 11 J	TOEF SINGL SUILL OLD IN BRUILCON
18209 PINES		114 SW 10TH ST				
PEMBROKE F	PINE\$ FL 33029	SUITE C FORT LAUDERDALE FL 33315 US			DO NOT WRITE IN THI	S SPACE
					3. Date Incorporated or Qualified	J DI ROC
	_				09/18/1995	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21 //4 SW/0Th ST, #C 26					65-0621044	Not Applicable
21 //4 SW/07h ST, #C 26 Suite, Apt. # alc. Suite, Apt 22 FT LANDERDACE FL 27			#, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State		<del></del> .		Fee Required
23		28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zio Country		Z(p) Country		ry	8. This corporation owes or has paid the c	
24 <i>53</i> 3	15 25 454	29	30		Personal Property Tax due June 30.	Yes No
g. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
649 S.W. 8TH TERRACE				81 Name		
				2 Street Address (P.O. Box Number is Not Acceptable)		
FORT LAUDERDALE FL 33315			8:	3		
				1		
			8	4 City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	ites, the abo	L ve-named con	poration submits this statement for the number	of changing its registered
office or r agent. I a	registered agent, or both, in the State o im familiar withour accept the obligat	of Florida, Such change was ions of Section 607,0505. F	authorized t lorida-Statute	by the corpora	tion's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE	Mochin	1 Kleer	last		4/2:	1/98
	Signature, typed or printed natural registered gent			gent signature requi	red when reinstating) DATE	7 -0
12.	D D OF ICERS AND	S AND DIRECTORS 13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12 Change Addition
NAME	YONGE, MARK	_ been	1 1 TITLE 1.2 NAME			C) Change C: Addition
STREET ADDRESS	649 S.W. 8TH TERRACE	AC CIM OTH TERRACE		ET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL 33315		1.4 City-			
TITLE	ST DELET		2.1 TITLE			Change Addition
NAME	YONGE, HOPE L		2.2 NAME			
STREET ADDRESS	649 S.W. 8TH TERRACE		2.3 STREE	ET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL 33315			- ST- ZIP		
TITLE NAME			3.1 T(1LE	)		☐ Change ☐ Addition
STREET ADDRESS			3.2 NAME	ET ADDRESS		
CITY-ST-ZIP			3.4. CITY-			
TITLE			4.1 TITLE	U. III	***	Change Addition
NAME			4.2 NAMI	f		. –
STREET ADDRESS			4 3 STREE	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-	SF-ZIP		
TITLE		☐ DELET <b>E</b>	5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			1	T ADDRESS		
CITY-ST-ZIP TITLE			5.4 CITY- 6.1 TITLE	ST-ZIP		Change Addition
NAME		- recent	6.1 HILE			C Orlange C Modificit
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			6.4 CITY -			ļ
	catifuthat the information complied with	this filing door not qualify			Socian 110 07/2\(ii) Florida Statuton I fudhar	

indicated on this annual report or supplied with this litting does not quality 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 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 atlanting that an address.