FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000079870 (8)

GINGERBREAD JUNCTION, INC.



						/
Principal Place	of Business	Mailing Address			in Bain Baig (40019 1861	11 1 0 14 (001) 0011 1001
2528 PALM BAY RD. NE 2528 PALM BAY RD. PALM BAY FL 32906 PALM BAY FL 32906						
		···-		3. Date incorporated or Qualified 10/16/1995	3a. Date of Las	t Report
2. Principal Pa 21		2a. Mailing Addres	s	4. FEI Number 59-335 4230	-	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, 6	to.	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
23	I			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Ζφ 	Country	Zφ	Country	8. This corporation has liability for it		
24]	25	[29]	30	Florida Statutes Yes	UNO TO	,
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New R	egistered Agent	
LAGAN	O ALPEOT C		81 Name	AGANO Albort	<	
	io, albert s 'Alm Bay Rd. Ne		82 Street Ac	ddress (P.O. Box Number is Not Acceptable		
SUITE	·		2.5	West New HAG	ien Si	ITE E
	BAY FL 32905		ρ_{c}	Box 897		
1 ALM C	JAT 11 32903		84 City 20	NOT OIT	85	Zin Code
11 Pure part to	o the provisions at Eastern COZ or on	1007.600 5		150UINE	FL 🏻 s	Zip Code 32 902-0 3
or registere	ed agent, or both, in the State of Flerid	land 607, 1508, Florida s Ja, Such change was au	statutes, the above-named corp thorized by the corporation's by	poration submits this statement for the purp		
familiar with	h, and accept the obligations of, Section	od 607.0505, Florida St a	states.	poration submits this statement for the purpopard of directors. I hereby accept the appo	intrient as register	au agent. Lam
Signature 🚆			>2_		3-28-	
12.	OFFICERS AND	notice Regionic	(NOT Fing sternel Agent signature requ		D. I.E.	
TIPLE	PO	DELETE	13.	ADDITIONS/CHANGES TO OFFIC		
IAME	BLAIR, JOHNA	_ been			Change	e 🔲 Addition
STREET ADDRESS	396 SAUDERS RD.		1 2 NAME			
DITY-ST-ZIP	PALM BAY FL 32909		13 STREET ADDRESS			
FITLE	VD	☐ DELETE	1 4 C(TY - ST - ZIP 2 1 TITLE			
NAME	DEAN, LISA	[] 00111			Change	e 🔲 Addition
STREET LADORESS	1274 WATERWAY ST. SW		2.2 NAME			
CITY - ST-ZIP	PALM BAY FL 32907	_	2.3 STREET ADDRESS			
TITLE	SD	DELETE	2.4 C/TY - ST - Z/P			
IAME	JONES, DEBRA	Accept	3 1 TITLE		☐ Change	Addition
STREET ADDRESS	770 PAMPAS ST. NW	•	3 2 NAME			
CITY - ST - ZIP	PALM BAY FL 32907		3.3 STREET ADDRESS			
r'LE	TD	DELETE	3 4 CITY - ST - ZIP 4 1 TITLE			
AME	BEAUPRE, DENISE	× better			☐ Change	Addition
TREET ACORESS	1651 CRANFIELD TERR. SE		4.2 NAME			ļ
OTY-ST-ZIP	PALM BAY FL 32909		4.3 STREET ADDRESS			1
ITLE		DELETE	4 4 CITY - ST - ZIP 5 1 TITLE		F3.6:	F-1 4
AME.			5 2 NAME		☐ Change	Addition
				30000180 -05/06/960103	8923	ر
THEET ADDRESS			5.3 STREET ADDRESS	-05/06/960103	2030	<u> </u>
			5 4 CITY - ST - ZIP	***200,00		0
17 ¥ - S7 - 71P		T DELETE		and the fact of the second	- -	
DTF-ST-7IP ITUE		DELETE	6 1 TITLE		Change	☐ Addition)
DITY-ST-ZIP LITUE NAME		[] DELETE	6 1 TITLE 62 NAME		☐ Change	Addition >
STREET ADDRESS DITY-ST-ZIP UTUF NAME STREET ADDRESS DITY-ST-ZIP		DELETE	6 1 TITLE	***************************************	☐ Change	Addition 3

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 change I, or on an attachment with an address

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DEAN - VICE President 3-28-96 953-5356