

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

International Deli & Cafe, Inc.

Principal Place of Business

Mailing Address

5703 W. Waters Ave
Tampa FLA. 33615

same

3. Date Incorporated or Qualified

11/6/95

3a. Date of Last Report

n/a

2. Principal Place of Business

2c. Mailing Address

21 same as above

26 same as above

4. FEI Number

59-3347933

Applied For

Not Applicable

5. Certificate of Status Desired

xx

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes

No

22
Suite, Apt. #, etc.

27
Suite, Apt. #, etc.

23
City & State

28
City & State

24
Zip

25
Country

29
Zip

30
Country

9. Name and Address of Current Registered Agent

Michael Muzio
2631 Mc Cormick Dr. #101
Clearwater, FL. 34619-1041

10. Name and Address of New Registered Agent

81 Name

Michael Muzio

82 Street Address (P.O. Box Number is Not Acceptable)

5703 W. Waters Ave.

83

84 City

Tampa

FL

85

Zip Code
33615

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

8/7/96

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Director/owner
Joseph Muzio
1319 Gulfview Woods Ln.
Tarpon Springs, FL 34689

xx DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Director/owner
Peter G. Suski
6246 Oak Cluster Circle
Tampa, Fla. 33634

xx DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP
Director/owner
Howard Blum
5822 Galleon Way
Tampa, FL 33615

Change xx Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

Change Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

Change Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

Change Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

Change Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

Change Addition

90000191922
-08/12/96--01041--051
***233.75

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 # changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

8/12/96

8/7/96 (813) 799-9727