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

FILED Mar 25 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT # P95000086383 (3) THE MUNCH-A-LUNCH CORPORATION Principal Place of Business Mailing Address 275 NW 165TH AVE. 275 NW 165TH AVE. PEMBROOK PINES FL 33028 PEMBROOK PINES FL 33028 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/01/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0659521 Not Applicable 21 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 8. Election Campaign Financing П 23 28 Trust Fund Contribution Added to Fees Country Country Žip Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MURRAY, GORDON 2820 NW 135TH ST. 82 Street Address (P.O. Box Number is Not Acceptable) OPA-LOCKA FL 33054 83 84 City Zip Code 85 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agont and title if applicable DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PVTS DELETE ☐ Change TITLE 1.1 TITLE **BREWTON, JOANNE B** 1.2 NAME 275 NW 165TH AVE. STREET ADDRESS 1.3 STREET ADDRESS PEMBROOK PINES FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 City-St-ZIP CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-\$T-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

14. I 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 effect as if made under oath; that I am an officer or director of the comporation 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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

-1

DELETE

raiston Joanne B. Brewton

Addition

Change