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 # P95000089318 (6)

CASSE CROUTE, INC.

Princ	ipal Pl	ace o	f Bus	iness
	-			

Mailing Address

FILED Jan 27 1998 8:00am Secretary of State



841 DONALD ROSS RD 841 DONALD ROSS RD JUNO BEACH FL JUNO BEACH FL DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/16/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0630012 Applied For NOT-APPLICABLE 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible Yes ☐ No 30 Personal Property Tax due June 30. 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MARDIROSSIAN, ANTOINE 841 DONALD ROSS RD 82 Street Address (P.O. Box Number is Not Acceptable) JUNO BEACH FL 83 84 City 85 Zip Code

FL 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agont signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE ☐ Change Addition TITLE 1.1 TITLE MARDIROSSIAN, ANTOINE NAME 1.2 NAME 166 S HAMPTON DR STREET ADDRESS 1.3 STREET ADDRESS JUPITER FL 33458 CITY-ST-ZIP 1.4 CITY-ST-ZIP Change DELETE Addition TITLE 2.1 TITLE **COURREGES, JEAN F** 22 NAME 166 S HAMPTON DR STREET ADDRESS 23 STREET ADDRESS JUPITER FL 33458 2.4 City-St-ZiP CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP ☐ Change DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby certify that the information supplied with this filling 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 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 13 if chapter 607 in an attachment with an address.

6.4 CITY - ST - ZIP

CITY - ST-ZIP

(au AD = 6=c. 1/10/9)

17/8000

72E034 (10/97