

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000092594 (7)

1. Corporation Name

THE PRETZEL BAKERY, INC.



Principal Place of Business

200 E ROBINSON STREET
SUITE 500
ORLANDO FL 32801

Mailing Address

200 E ROBINSON STREET
SUITE 500
ORLANDO FL 32801

3. Date Incorporated or Qualified

12/06/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-8857839

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FLORIDA CORPORATE SUPPORT, INC.
200 E ROBINSON STREET
SUITE 500
ORLANDO FL 32801

81 Name

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

83

84 City

FL

85 Zip Code

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 Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
D
WEBER, PAUL
200 E ROBINSON STREET SUITE 500
ORLANDO FL 32801

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
D/P/S
WEBER, PAUL
200 E. ROBINSON ST, Suite 500
ORLANDO, FL 32801

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
D
THUM, STEFAN
200 E ROBINSON STREET SUITE 500
ORLANDO FL 32801

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
D/VP
THUM, STEFAN
200 E. ROBINSON STREET, Suite 500
ORLANDO, FL 32801

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12 APRIL 1996

Date

Daytime Phone #

CR2E034 (12/95)