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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # P9600001392 (5)

FOOD WITH A FLAIR, INC.

Principal Place of Business

Mailing Address

18328 LAKE-GEORGE LANE

13328 LAKE GEORGE LANE

FILED May 13 1997 8:00am Secretary of State



TAMPA FL 33618	- · · · ·	TAMPA-FL-93616-9224 -						
				3. Date Incorporated or Qualified 01/05/1996	ed 3a. Date of Last Report			
2. Principal Place of	Business FLORIDA AV	2a. Mailing Address	C. A.	1 4	4. FEI Number		Ap	oplied For
21 1146/ 1	, A. COUNDY DA	c, 26 /176/ N.	TC, 08%	DA AVE	59-335090	04	No	ot Applicable
Suite, Apt. #, etc. 22 SU//E	B	Suite, Apt. #, etc. 27 SU/ 1 E	B	·	5. Certificate of Status Desired		8.75 / Fee Re	Additional equired
City & State 23 TAMPA	FL	City & State 28 TAMPA	FL		Election Campaign Financing Trust Fund Contribution		\$5.00 Added	
Zip 26/2	Country 25 USA	29 33612	Countr 30	SA		Yes 🗆 N	10	. 199.032,
	ame and Address of Currer			· • · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Re-	gistered Age	ent	
	TRM OF LAWRENCE J SI	PIEGEL CHRTD	81	Name				
343 ALMERIA AVENUE CORAL GABLES FL 33134				Street Address (P.O. Box Number is Not Acceptable)				
			83			,,		
			84	City			15 Zip (Code
·				Oity		FL	200	5000
 Pursuant to the p office or registere agent. I am famili 	rovisions of Sections 607.050 ad agent, or both, in the State ar with, and accept the oblig	02 and 607.1508, Florida Statu of Florida. Such change was lations of, Section 607.0505, Fl	ites, the above authorized b forida Statute	re-named corp by the corporations.	oration submits this statement for the p ion's board of directors. I hereby accep	urpose of chot the appoint	anging it Iment as	s registered registered
	lyped or printed name of registered ag-		1E: Heg stored Ac	jont signature require	od when reinstating)	DATE		
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC			
TITLE PD		L_ DELETE	1.1 TOLLE			L	Change	Addition
	CIA, THOMAS P	40.00	1.2 NAME					
	B-LAKE-GEORGE-LANE	SEE AGOVE		T ADDRESS				
	A-FL-83618 ·	BOOKES S	1.4 C/TY-	\$1-7IP				I Address
TITLE STD	SHIOLIAM MADE I	L_J DECERE	2.1 TITLE				Change	☐ Addilion
NAME CUNI	NINGHAM, MARK L B LAKE GEORGE LANE	CEE ADONE	2.2 NAME	, about to				
STREET ADDRESS 1332	A FL-83618 -	ADDRESS		1 ADDRESS				
CITY-ST-ZIP - TANK	W. 1. 000 10 -	DILLIE	2. 4 CITY 3.1 TITLE	-51-71		——————————————————————————————————————	Change	Addition
NAME			3.2 NAME				enange	
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			3.4. Chi y	l l				
TITLE	······································	DELETE	4.1 TITLE				Change	Addition
NAME			4. 2 NAM	:				
STREET ADDRESS			4 3 STREE	T ADDRESS				
CITY-ST-ZIP			4.4 CITY-	ST-ZIP				'
TITLE		DELETE	5.1 7/11.8				Change	Addition
NAME			5.2 NAME		•			
STREET ADDRESS			5.3 S1RE6	1 ADDRESS				
CITY-ST-ZIP			5.4 City -	ST-ZIP				
TALE		DELETE	617018	1			Change	☐ Addition
NAME			G.2 NAME					
STREET ADDRESS			6.3 STREE	1 ADDRESS				
CiTY-ST-ZIP			6.4 DITY-	ST-ZIP				į

14. I do 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 eath; that I am an officer or director of the corporation of the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name