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May 08 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000004081 (1)

1. Corporation Name

SOUTHERNMOST DONUT COMPANY, INC.

Principal Place of Business

2504 NORTH ROOSEVELT BLVD.
KEY WEST FL 33040

Mailing Address

2304 NORTH ROOSEVELT BLVD.
KEY WEST FL 33040-3927



2. Principal Place of Business

21 601 Duval Street

Suite, Apt. #, etc.

22 Suite 4

City & State

23 Key West, FL

Zip

24 33040

Country

25 Monroe

2a. Mailing Address

26 601 Duval Street

Suite, Apt. #, etc.

27 Suite 4

City & State

28 Key West, FL

Zip

29 33040

Country

30 Monroe

3. Date Incorporated or Qualified

01/12/1996

3a. Date of Last Report

4. FEI Number

65-0658284

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

MACDERMOTT, JAY
2504 NORTH ROOSEVELT BLVD.
KEY WEST FL 33040

10. Name and Address of New Registered Agent

81 Name Paul S. Mills, C.P.A.
82 Street Address (P.O. Box Number is Not Acceptable)
601 Duval Street, Suite 4
83
84 City Key West FL 85 Zip Code 33040

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

Paul S. Mills CPA

PAUL S. MILLS

4/29/97

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 D
NAME ROSS, DAVID A
STREET ADDRESS 1800 ATLANTIC BLVD. UNIT C-341
CITY-ST-ZIP KEY WEST FL 33040

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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:

DAVID A. ROSS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/97

Date

(305) 296-1488

Daytime Phone #

CR2E034 (9/96)