## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P96000005031 (5)

DONUT DELIGHT, INCORPORATED

## **FILED** Sep 15 1997 8:00am Secretary of State



Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Country  Zip  Country  Zip  Country  Zip  Country  Zip  Country  Zip  Country  Serional Property Tax due June 30. Yes  JOSLYN, LILIA D  7540 S.W. 126TH STREET  MIAMI FL 33156  81 Name  Sireet Address (P.O. Box Number is Not Acceptable)  10. Name and Address of New Registered Agent  82 Street Address (P.O. Box Number is Not Acceptable)  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 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 reagent. 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 refirstering).  DATE	1101 (40)
MIAMI FL 33156    DO NOT WRITE IN THIS SPACE	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0635683 April Not	
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22. Principal Place of Business	ort
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Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  Zip  Country  Zip  Country  Zip  Country  Zip  Country  B, Name and Address of Current Registered Agent  JOSLYN, LILIA D  7540 S.W. 126TH STREET  MIAMI FL 33156  81 Name  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 Tip Country  84 City  FL B5 Zip Country  15 City & State  Country  85 Tip Country  86 Certificate of Status Desired Sta	ied For
City & State   City & State   City & State   Country   Zip   Country   Zip   Country   Registered Agent   Street Address of New Registered Agent   Street Address (P.O. Box Number is Not Acceptable)	Applicable
Zip Country Zip Country Sip Sip Signature required when reinsteing)  Added to Added	ılred
Zip Country Zip Country 25 29 30 Personal Property Tax due June 30. Yes Zip Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable)    Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)   DATE   Data   Data	
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TO A PROPERTY OF A SECURIOR AND DISCOSTOR	
	IN 12
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  INTILE D DELETE 1.1 TITLE Change	Addition
NAME JOSLYN, LILIA D 1.2 NAME	
STREET ADDRESS 7540 S.W. 126TH STREET 1.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI FL 33156 1.4 CITY-ST-ZIP	ł
TITLE DELETE 2.1 TITLE Change	☐ Addition
NAME 22 NAME	
STREET ADDRESS 2.3 STREET ADDRESS	ļ
CITY-ST-ZIP 2. 4 CITY-ST-ZIP	
TITLE DELETE 3.1 TITLE Change	☐ Addition
NAME 3.2 NAME	
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CITY-ST-ZIP 3.4. CITY-ST-ZIP	1400
TITLE DELETE 4.1 TITLE Change	☐ Addition
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CITY-ST-ZIP 4.4 CITY-ST-ZIP	1.446000
TITLE DELETE S.1 TITLE Change	Addition
NAME 52 NAME	i
STREET ADDRESS 5.3 STREET ADDRESS	
CITY-ST-ZIP         5.4 CITY-ST-ZIP           THIF         DELETE         6.1 TITLE         Change	Addition
NAME 6.2 NAME	
STREET ADDRESS 6.3 STREET ADDRESS	
CITY-ST-ZIP  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 recover or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name, appears in Block 12 a Block 13 if changes, or on an attachment with an address.