SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000018770 (3)

A & S DONUT, INC.

Principal	Place	nf.	Dueinace
rincipal	riace	G	Dusiness

SIGNATURE:

Mailing Address

4044 1 AVE WORTH BOA

FILED Oct 07 1998 8:00am° Secretary of State

98561-692-6115

4644 LAKE WORTH NOAU LAKE WORTH FL 33463	LAKE WORTH FL 33463					
			DO NOT WRITE IN TH	IS SPACE		
			3. Date Incorporated or Qualified			
			02/27/1996	·		
2. Principal Place of Business	2a. Mailing Address	. 41 - 1	4. FEI Number	Applied For		
1 4694 Lakeworth rd	26 4694 lake u	300 <u>n</u> 89	65-0659628	Not Applicable		
Suite, Apt. #, etc.	Suita, Apt. #, etc. 27 Lakewah Fl City & State	wida	5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State	101	6. Election Campaign Financing	\$5.00 May Be		
	28 33463 P	ulm Beach	Trust Fund Contribution	Added to Fees		
Zip Country	,	Country	8. This corporation owes or has paid the c	—		
	25 29 30 Personal Property Tax due June 30. Yes No. 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
·· · · · · · · · · · · · · · ·	efliatoren Affent	81 Name				
Calideen, andy 1039 Fairfax Circle W	ISAO WANGEAR RINGU.					
LANTANA FL 33462			ss (P.O. Box Number is Not Acceptable)	a 10		
LANTANA FL 33402		83	35 CHROEN HILL			
		P.17.				
		84 City	·	85 Zip Code		
11. Pursuant to the provisions of sections 607.0502 at	od 607 1509 Florida Statutae tha	ahove named corner	ation pulmits this statement for the purpose of	changing its registered		
office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation	Florida. Such change was authori	zed by the corporation	n's board of directors. I hereby accept the app	olntment as registered		
agent. I am familiar with, and accept the obligation	ns of, section 607.0505, Florida S	itatules.	galgali	998		
SIGNATURE . Signature, typed or printed partial Lagritic of agent an	Title f applicable. (NOTE: Re:	istered Agent signature requir		1 10		
12. OF NICERS AND I		3.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12		
INLE STD	DELFTE 1.	ITILE		Change Addition		
NAME RAJBHANDARI, SUDHIR P		NAME	9000026578			
STREET ADDRESS 5385 GARDEN HILL CIRCLE	1.3	STREET ADDRESS	-10/07/98-01073-			
WEST PALM BEACH FL 33415	11	I CITY-\$1-ZiP	***156.00	₩ 1.6 X		
DILE	DELETE	TITLE		Change Addition		
NAME		NAME				
STREET ADDRESS	2:	STREET ADDRESS				
HTY-ST-ZIP	2.6	I CITY-ST-ZIP				
	DELETE 3	TITLE		Change Addition		
AME.	3.5	NAME		<u> </u>		
STREET ADDRESS	33	STREET ADDRESS				
CITY-ST-ZIP	3.4	CITY-ST-ZIP				
ITLE	DELETE 4	TITLE		Change Addition		
AME	4.2	NAME		11010		
TREET ADDRESS	43	STREET ADDRESS		1/10/1		
CITY-ST-2IP	4.4	CITY-S1-ZIP		<i>I</i> U ('		
IILF	DELETE 5.1	TITLE		Change Addition		
IAME	5.2	NAME				
TREET ADDRESS	5.3	STREET ADDRESS				
SITY-ST-2IP	5.4	CITY-ST-ZIP				
ITLE	DELETE 6.1	TITLE		Change Addition		
IAME	6.2	NAME				
STREET ADDRESS	6.3	STREET ADDRESS				
CITY-ST-ZIP	6.4	CITY-ST-ZIP				
14. I hereby certify that the information supplied with this	filing does not qualify for the exe	mption stated in section	on 119,07(3)(i), Florida Statutes. I further certif	y that the information		
indicated on this annual report or supplemental ann	ual report is true and accurate ar	io mat my signature s	nan nave the same legal effect as if made un	per oath: that I am		
an officer or director of the corporation or the receivin Block 12 or Block 13 if changed, or on an attach	er or trustee empowered to execu	ute this réport as reou	ired by Chapter 607, Florida Statutes: and thi	at my name appears		