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 # P96000021375 (6)

SUNCOAST BAGELS, INC.

FILED Sep 19 1997 8:00am Secretary of State



Principal Place of Business Mailing Address							
1270 SPOONBILL LANDING CIR 1270 SPOONBILL LANDING CIF			MB.				
BRADENTON F		BRADENTON FL 34209	AIT.				
					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	3a. Date of Las	st Report
6 Daineiral D	No. of Durings	De Martin Calabana			03/06/1996		1
	flace of Business	26. Mailing Address 26. 5917 Mar	nLa.	A (5	4. FEI Number 650,577	<u> </u>	Applied For
Suite, Apt.	1 Maynte Aux W	Suite, Apt. #, etc.	<u>iq cu</u>	HU W	11 (25/2012)	¢9.7	Not Applicable 5 Additional
22	w, otc.	27			5. Certificate of Status Desired		Required
	City & State				6. Election Campaign Financing \$5.00 May Be		
23 1000	enten, +L	28 Brodentin	1		Trust Fund Contribution	<u> </u>	ed to Fees
Zip	Country USA	Zip	Counti سعدا ت	y AlıcΔ	8. This corporation owes or has paid		
24 34 ac		29 34209 31		<u>n USA</u>			□No
	9. Name and Address of Current F	Jegistereo Agent	8	1 Name	10, Name and Address of New Reg	ISTOTED AGENT	
TOCKER, GART				1 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
BRADENTON FL 34209				3			
						14-1 4	<u> </u>
			8	4 City		FL 85 2	Ip 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 priviled name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE							
12.	Signature, typed or printed name of registered agent a OFFICERS AND I		ngistered A	geni signature requi	ADDITIONS/CHANGES TO OFFICE	DATE BS AND DIRECT	OBS IN 12
TITLE	D	DELETE	1.1 TITLE		ADDITIONO OF INITIAL TO OTHER	☐ Chan	
NAME	TUCKER, GARY	, —	1.2 NAME				
STREET ADDRESS	1270 SPOONBILL LANDING CIR			ET ADDRESS			
CITY-ST-ZIP	BRADENTON FL 34209		1.4 CITY				
TITLE		DELETE	2.1 TITLE		3 · .	Chang	ge Addition
NAME	-KICKER, GARY.		2.2 NAME	:	** *	*	
STREET ADDRESS	#917 MaratooAve	W.	2.3 STREE	T ADDRESS			
CITY-ST-ZIP	Tucker, GARY. 5917 Manatur Aux 1 Bradenton, 72 342	a.	2.4 CITY				
TITLE		DELETE	3.1 TITLE			☐ Chan	ge Addition
NAME			3.2 NAM				į
STREET ADDRESS			3.3 STRE	ET ADDRESS			
CITY-ST-ZIP			3.4. CITY	-ST-ZIP			i
TITLE		DELETE	41 TITLE	<u> </u>		☐ Chane	ge 🔲 Addition
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STREET ADDRESS			4.3 STRE	et address			
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NAME .			5.2 NAME	1			
STREET ADDRESS			5.3 STREI	T ADDRESS			1
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			1
TITLE		☐ DELETE	6.1 TITLE			Chang	ge Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	T ADORESS			į
CITY-ST-ZIP			6.4 CITY	·ST-ZIP			l
44 1 4 4 4 4 4 4	and the state of t	Children Committee Committ			11- O 140 07(0)() Fig.: 4- O	1.6 41	

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.

CIGNATURE.