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

N PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000044466**1. Corporation Name

ROASTERS DELI ENTERPRISES, INC.

	<u> </u>						—-		A UD AR BURNINGS	A 1110 DY	dia didik dik		Dill ibbi
Principal Place	e of Business	K	Mailing Address										
12257 SW 130TH STREET			12257 SW 130TH STREET										
MIAMI FL 33186		М	MIAMI FL 33186					DO NOT WRITE IN THIS SPACE					
							3. Da	te Incorporated or C					
								5/23/1996			٠		\
2 Principal P	lace of Business	28	Mailing Address					l Number			\Box	Applied	For
21 () () () () () ()	100 01 20011000	26	i				65	5-0667333				Not Ap	plicable
Suite, Apt.	# etc	- 120	Suite, Apt. #, etc.								\$8.75	5 Addi	tional
22		27				=====		ertifcate of Status De	sired	·	Fee	Requir	ed
City & State	9	- - -	City & State				6. Ele	ection Campaign Fin	ancing _		\$5.0	0 May	/ Be
23		28]				1	ust Fund Contribution	- 11		Adde	ed to Fe	es
Zip	Country		Zip	Co	untry	-7/	8, Th	is corporation owes	the current y	ear Inta	ngible		
24	25	29	}	30			Pe	ersonal Property Tax.			☐ Yes		No
	g. Name and Address of Curre	nt Regi	istered Agent		Т		10. Na	ame and Address o	f New Regis	tered A	gent		
					81	Name							
Gruber, Peter G PA					82	Stroot A	treet Address (P.O. Box Number is Not Acceptable)						
9100 SOUTH DADELAND BLVD. STE			10			SireerA	duress (F.O.	. Box 14thinger is 14ot	πουυριασίο				}
MIAMI FL 33156					83		-						}
	•		•		<u>L</u>						71		
					84	City				FL	85 Zi	ip Code	•
44 Burguant	to the provisions of Sections 607.05	no and	607 1508 Florida Sta	atutes the	ahov	e-named co	orporation su	bmits this statement	for the purp	ose of c	hanging	its reg	stered
office or r agent. I a	egistered agent, or both, in the Stati m familiar with, and accept the oblig	e of Flor	rida. Such change wa	is authorize	ed by	the corpora	ation's board	d of directors, I neret	y accept the	нарроіп	imeni as	regisie	ned
SIGNATURE	Signature, typed or printed name of registered ag	ent and titl	e if applicable. (N	IOTE: Registere	d Ager	nt signature requ	uired when reinst			ATE			
12.	OFFICERS A	ND DIR	RECTORS	13			ADI	DITIONS/CHANGES	TO OFFICE	RS AND			
TITLE	PSD		☐ DELETE	1.1	ME	ļ					Chang	₃e [Addition
NAME	KANTROWITZ, JACK			1.21	NAME	Ì							
STREET ADDRESS	12257 SW 130TH STREET			1.3	STREE	TADDRESS				•			1
CITY-ST-ZIP	MIAMI FL 33186			1,4 (CITY-S	T-ZIP							
TITLE			☐ DELETE	2.1	TITLE		 -				Chang	ge [Addition
NAME				2.2	NAME								
STREET ADDRESS				2.3	STREE	T ADDRESS							
CITY-ST-ZIP			•	2.4	CITY-S	ST-ZIP	2 4		<u> </u>				
TITLE			☐ DELETE	3.1	TITLE						☐ Chang	ge {	Addition
NAME				3.2	NAME								ļ
STREET ADDRESS				3.3	STREE	TADORESS							Ì
CITY-ST-ZIP				4	CITY-5								į
TITLE			DELETE	_	TITLE						☐ Chang	ge [Addition
NAME	1		_ _		NAME								}
						TADDRESS							Ì
STREET ADDRESS				1									1
CITY-ST-ZIP	 		☐ DELETE		CITY-S TITLE	1-45	· -				Chang	ge	Addition
,			ے عددداد		NAME	-						-	
NAME	1					T ADDRESS		•			•		
STREET ADDRESS	I			3.3	GIREE	ו איייייייייייייייייייייייייייייייייייי							ì

CITY-ST-ZIP 14. I 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 eport 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 rustee 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 attachprent with an address, with all other like empowered.

6.1 TITLE

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE NAME

DELETE

Change

Addition

CR2E034 (1.1/98).....

Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90012 028 ***150.00