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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

NAME

TITLE

NAME

TITLE

NAME STREET ADDRESS

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000052569 (6) DOCUMENT

FERRARAS GOURMET DELI INC.

Principal Place of Business Mailing Address 445 W LANTANA RD 445 W LANTANA RD LANTANA FL 33462 LANTANA FL 33462 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/19/1996 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 21 26 Not Applicable 65-0730419 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired \Box Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country Zip This corporation owes or has paid the current year Inlanguate Personal Property Tax due June 30. Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FERRARA, GIUSEPPE 445 W LANTANA RD Street Address (P.O. Box Number is Not Acceptable) 82 LANTANA FL 33462 83 84 City Zip 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, typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETÉ 1.1 TITLE Change Addition NAME FERRARA, GIVSEPPE 1.2 NAME STREET ADDRESS 445 W. LANTANA RD 1.3 STREET ADDRESS ANTANA FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE Change Addition 2 1 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.3 STREET ADDRESS

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5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CiTY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY - ST-ZIP

3.1 TITLE

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

DELETE

CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. Thereby 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 charged ofton an attachment with an address.

(10/97 **72E034**

Addition

■ Addition

__ Addition

■ Addition

Change

Change

Change

Change

FILED

Apr 24 1998 8:00am

Secretary of State