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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000055899 (4)

AN ARRAY OF GOURMET AND GIFTS, INC.

Principal Place of Business

SIGNATURE:

Mailing Address

FILED May 12 1997 8:00am Secretary of State



| 415 SECOND AVENUE NORTH LAKE WORTH FL 93460 | | 415 SECOND AVENUE NORTH LAKE WORTH FL 33460-3401 | | | | |
|---|--|--|--|--|--|-------------------------|
| | | | | 3. Date Incorporated or Qualified 06/28/1996 | 3a. Date of Last Rep | oort |
| · · | lace of Business | 2a. Mailing Address | 101 | 4. FEI Number | Appl | lied For |
| 21 2/35 | | 26 2/35 5; | US/ | 65-0696498 | Not a | Applicable |
| Sulte, Apt. | #, etc. | Suite, Apt. #, etc. | • | 5. Certificate of Status Desired | \$ 8.75 Ad | |
| 22 27 | | | | | Fee Requ | |
| City & State | " To E(| City & State | EC | 6. Election Campaign Financing | \$5.00 M | |
| 23 Vy | Country, | 28 Jupiler | Dountry | Trust Fund Contribution | ☐ Added to | |
| 24 3347 | 77 25 Palm Beh | 29 33477 3 | ¬ T) / ~ | 8. This corporation has liability for Florida Statutes | intangible tax under s. 1] Yes : [] No | 99.032, |
| | 9, Name and Address of Current | | of term oc | 10. Name and Address of New Re | | |
| JORDAN, EMORY C III 415 SECOND AVENUE NORTH LAKE WORTH FL 33460 | | | 81 Name | | | |
| | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | |
| | | | | | | |
| | | | 84 City | | 85 Zip Co | ode |
| · | | | | | FL S E FC | |
| 11. Pursuant office or r agent. I a | to the provisions of Sections 607.0502 registered agent, or both, in the State of im familiar with, and accept the obligat | and 607.1508, Florida Statutes, f Florida Such change was aut ons of, Section 607.0505, Florid | , the above-named horized by the corp da Statutes, | corporation submits this statement for the potention's board of directors. I hereby acce | ourpose of changing its rept the appointment as re | registered egistered |
| SIGNATURE | Signature, typed or printed name of teg stored agent | and title if anninable (NOTE E | legistered Agent signature | revolved whos reinstaling) | DATE | |
| 12. | OFFICERS AND | | 18. | ADDITIONS/CHANGES TO OFFIC | | IN 12 |
| TITLE | D | DELETE | 1.1 TITLE | | | Addition |
| NAME | DUNN, ANDREA B | | 1.2 NAME | • | | |
| STREET ADDRESS | 2 BENT WATER CIRCLE | | 1.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | BOYNTON BEACH FL 33462 | | 1.4 CITY-ST-7IP | | | |
| TITLE | | ☐ DELETE | 2.1 TITLE | | ☐ Change | Addition |
| ŅAME | | | 2.2 NAME | | • | } |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | | į |
| CITY-ST-ZIP | | T of the | 2. 4 CITY-S1-ZIP | | | 1 Addition |
| TITLE | | ☐ DELETE | 3.1 TITLE | | ∟_ Change | Addition |
| NAME | | | 32 NAME | | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | DELETE | 3.4. CHY-ST-ZIP 4.1 TITLE | | Change | Addition |
| NAME | | | 4. 2 NAME | | | |
| STREET ADORESS | | | 43 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 4.4 Dity-St-ZIP | | | ĺ |
| TITLE | | DELETE | 5.1 MILE | | ☐ Change | Addition |
| NAME | | | 5.2 NAME | | | } |
| STREET ADDRESS | | | 5.3 \$1RFE1 ADDRESS | | | |
| CITY-ST-ZIP | | | 5.4 CI1Y-S1-ZIP | · · · · · · · · · · · · · · · · · · · | | } |
| TITLE | | DELETE. | 61 HTLE | | ☐ Change | Addition |
| NAME | | | 6.2 NAME | · | | ļ |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | | 1 |
| CITY-ST-ZIP | | | 64 CITY-S1-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 eath, 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. | | | | | | |