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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham ⁴

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Mar 24 1997 8:00am

Secretary of State

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DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000057102 (1)

GUS' 12TH STREET CAFE, INC.

Mailing Address Principal Place of Business 2594 12TH ST. 2594 12TH ST. SARASOTA FL 34237-2943 SARASOTA FL 34237 3. Date Incorporated or Qualified 3a. Date of Last Report 06/28/1996 2a. Mailing Address 4. FEI Number 2. Principa Place of Business Applied For Not Applicable 26 Suite, Apt. #, eti Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 Trust Fund Contribution Added to Fees Žiu Ziri Country Country This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 AMERES, GUS 2594 12TH ST. 82 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34237 83 84 City Zip Code 85 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 agent 1 am family willy, and accept the appointment as registered agent 1 am family willy, and accept the appointment of Section 607.0505, Florida Statutes. og there any that digited application (NOTH Fledishered Annual so alure required whon reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. (96/6) 12 PRESIDENT DELETE 1.1300 € Change Addition 7010 AMERES, GUS 1.2 NAME STREET ACIDRESS 1.3 STREET ADDRESS 1.4 City-ST-ZiP City -St - 7-2 21 TITLE Change Add tion Tillet 2.2 NAME NAM: 2.3 STREET ADDRESS STREET ADVIRGING 2 4 CHY-S1-ZIP E01Y - ST. 7(P. Change Addition TOTAL 3.1 TITLE 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 C(1)Y-ST-ZIP DELETE Addition 4.1.11TLE THEFE 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CiTY - ST - ZIP CITY: \$1-7P DELETE Change Addition LIH 51 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ASJORESS 5.4 CITY~\$1-7iP CITY S - ZIP DELETE Change Addition 1151.6 6.1 TITLE No.W: 6.2 NAME 6 3 STREET ADDRESS STREET ADDRESS 6 4 CITY-ST-ZIP

14. I do hereby cort ty 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 specific as if made under oath, that I am an officer or director of the composition or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name