

**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.)**

APPROVED
AND
FILED

97 SEP 10 PM 2:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000058722 (5)

1. Corporation Name
SAVOUR GOURMET, INC.

Principal Place of Business 1811 FOLKSTONE ROAD TALLAHASSEE FL 32312	Mailing Address 1811 FOLKSTONE ROAD TALLAHASSEE FL 32312
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1452 N.E. 130th St.	2a. Mailing Address 26 1452 N.E. 130th St.	3. Date Incorporated or Qualified 07/12/1996	3a. Date of Last Report
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	4. FEI Number 59-3391048	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
23 City & State North Miami, FL	28 City & State North Miami, FL	5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
24 Zip 33161	25 Country V.S.A.	29 Zip 33161	30 Country V.S.A.
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

9. Name and Address of Current Registered Agent

FERNANDEZ-STRATTON, MARIA C
1811 FOLKSTONE ROAD
TALLAHASSEE FL 32312

10. Name and Address of New Registered Agent

81 Name
Fernandez, Mario J.

82 Street Address (P.O. Box Number is Not Acceptable)
1452 N.E. 130th St.

83

84 City
North Miami

85 Zip Code
FL 33161

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 Mario J. Fernandez DATE _____

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	President Raul O. Fernandez
1.3 STREET ADDRESS	2872 Wilkicrane Dr.
1.4 CITY - ST - ZIP	Tallahassee, FL 32308
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Mario J. Fernandez
2.3 STREET ADDRESS	Chef - of - Operations
2.4 CITY - ST - ZIP	931 S. Park Rd. Apt. 310 Hollywood, FL 33021
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	200002292352-6
3.4 CITY - ST - ZIP	-09/12/97-01132-023
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	***165.00
4.3 STREET ADDRESS	***165.00
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - 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 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.

SIGNATURE: Mario J. Fernandez 9/5/97 205-981-8777

CRE034 (4/97)