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

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## P96000063655 (0) DOCUMENT #

FRANCHISE MENTORS, INC.

| Principal Place | of Business |
|-----------------|-------------|
| SACS LAKEVIEW   | D#R         |

Mailing Address

## **FILED** May 14 1997 8:00am Secretary of State



| 3401 LAKEVIEV<br>DELRAY BEAC |   | 3401 LAKEVIEW DR<br>DELRAY BEACH FL 33445-57 | 730                          |   |
|------------------------------|---|--|------------------------------|---|
|                              |   |  |                              | 3. Date Incorporated or Qualified 3a. Date of Last Report 07/30/1996                    |
| 2. Principal P<br>21 2086    | lace of gusiness  9 VINAR TRAIL   | 2a. Mailing Address<br>26 20869 PIN          | AR TRAI                      | 4. FET Number Applied For   |
| Suite, Apt.                  |   | Suite, Apt. #, etc.                          |                              | 5. Certificate of Status Desired S8.75 Additional Fee Required                          |
| City & State 23 BOCK         | + RATON TI  | City & State 28 BOCA RATION                  |                              | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees      |
| Zip 334                      | 25 V9A  | 29 77433 3                                   | Country<br>VSA               | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes |
|                              | 9. Name and Address of Current  | Registered Agent                             | 81 Name                      | 10. Name and Address of New Registered Agent  |
|                              | FOX, RICHARD C  |  |                              | ENRY FISCHER  |
|                              | 1 LAKEVIEW DR   |  | 82 Street                    | Address (P.O. Box Number is Not Acceptable)   |
| UEL                          | RAY BEACH FL 33445  |  | 83                           | 0869 PINAR TRAIL  |
|                              |   |  |                              |   |
|                              |   |  | 84 City                      | BOCA PATON FL 85 7 30 30 30   |
| 11. Pursuant                 | to the provisions of Sections 607.0502  | and 607.1508, Florida Statutes               | The above-named              | Cornoration submits this statement for the nurpose of changing its registered. I        |
| Onice of f                   | egistered agent, or both, in the State of<br>m familiar with, and accept the obligati | t Florida. Such chance was auf               | horized by the cor           | poration's board of directors. I hereby accept the appointment as registered            |
| SIGNATURE.                   | Three Tracker   |  | COLER                        | 1/3/97  |
|                              | Signature, typed printed name of registered agent                                     |  | logistered Agent signature   | e required when reinstaling) DATE   |
| 12.                          | OFFICERS AND  |  | 13.                          | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12                                       |
| TITLE                        | D<br>FOY DIOUADD O  | <b>S</b> DELETE                              | 1.1 TH LE                    | Change X Addition   |
| NAME                         | FOX, RICHARD C  |  | 1.2 NAME                     | HENRY FISCHER   |
| STREET ADDRESS               | 3401 LAKEVIEW DR<br>DELRAY BEACH FL 33445   |  | 1.3 STREET ADDRESS           | HENRY FISCHER 20869 PINAR TRAIL BOXA RATON TO 53433                                     |
| CITY-ST-ZIP<br>TITLE         | DELINAT BEACH FL 33445  | DELFTE                                       | 1.4 C(TY-S1-ZIP<br>2.1 T(TLE | 130CA 141TON 1V 37477   |
| NAME                         |   |  | 2.2 NAME                     | Change Addition   |
| STREET ADDRESS               |   |  | 2.3 STREET ADDRESS           |   |
| CITY-ST-ZIP                  |   |  | 2.4 CITY - ST - ZIP          |   |
| TITLE                        |   | DELETE                                       | 3.1 TITLE                    | Change Addition   |
| NAME                         |   |  | 32 NAME                      |   |
| STREET ADDRESS               |   |  | 3.3 STREET ADDRESS           |   |
| CITY-ST-ZIP                  |   |  | 3 4. CITY - ST - ZIP         |   |
| TITLE                        |   | DELETE                                       | 41 TITLE                     | Change Addition   |
| NAME                         |   |  | 4. 2 NAME                    |   |
| STREET ADDRESS               |   |  | 4.3 STREET ADDRESS           |   |
| CITY-ST-ZIP                  |   |  | 4.4 C(1Y - ST - Z(P          |   |
| FITLE                        |   | ☐ ĐELETE                                     | 5.1 TITLE                    | Change Addition   |
| NAME                         |   |  | 5.2 NAME                     |   |
| STREET ADDRESS               |   |  | 5.3 STREET ADDRESS           |   |
| CITY-ST-ZIP                  |   | Drith  | 5.4 CITY- \$T-ZIP            |   |
| TITLE                        |   | ☐ DELETE                                     | 6.1 TITLE                    | ☐ Change ☐ Addition   |
| NAME<br>STREET ADDRESS       |   |  | 6.2 NAME                     |   |
| STREET ADDRESS               |   |  | 6.3 STREET ADDRESS           |   |
| CITY-ST-ZIP                  |   |  | 64 CITY-S1-ZIP               |   |

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 trusted 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: There & Trackers

4/18/87

561-483 6335