

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

FILED

May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000065228 (4)

1. Corporation Name
POPPY'S SUBS, INC.

Principal Place of Business

1300 E. HILLSBORO
SUITE 104
DEERFIELD FL 33441

Mailing Address

1300 E. HILLSBORO
SUITE 104
DEERFIELD FL 33441

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

08/05/1996

4. FEI Number

65-0685262

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name
DAVID J. YATES

82 Street Address (P.O. Box Number is Not Acceptable)

1200 NE 48TH ST.

83

84 City
POMPANO BEACH

FL

85 Zip Code
33064

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, to 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 of officer or printed name of registered agent, as applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

11/7/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBERTS, CAROL	1.2 NAME	
STREET ADDRESS	1300 E. HILLSBORO, SUITE 104	1.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD FL 33441	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YATES, DAVID	2.2 NAME	
STREET ADDRESS	1300 E. HILLSBORO, SUITE 104	2.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD FL 33441	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBERTS, NICOLE	3.2 NAME	
STREET ADDRESS	1300 E. HILLSBORO, SUITE 104	3.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD FL 33441	3.4 CITY-ST-ZIP	
TITLE	SD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHANNON-YATES, KELLIE	4.2 NAME	
STREET ADDRESS	1300 E. HILLSBORO, SUITE 104	4.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD FL 33441	4.4 CITY-ST-ZIP	
TITLE	TD	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YATES, RANDI	5.2 NAME	
STREET ADDRESS	1300 E. HILLSBORO, SUITE 104	5.3 STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD FL 33441	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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:

Signature and typed or printed name of signing officer or director

11/7/98 (954) 781-5454

CR2E034 (10/97)