

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morlham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # *PA6000065527*

1. Corporation Name

Hetesi Inc.

Principal Place of Business

Mailing Address

1840-42 N. UNIVERSITY Dr. 1840 N. Univeristy Dr.
Plantation, FL 33322 Plantation, FL 33322

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 Suite, Apt. #, etc		26 <i>Cafe Old Europe</i>		1996		Applied For	
22 City & State		27 <i>1842 N. University Dr.</i>		4. FEI Number		Not Applicable	
23 Zip		28 <i>Plantation, FL</i>		65-0687941		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
24 Country		29 <i>U.S.A.</i>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name	<i>Carol Hetesi</i>		
82 Street Address (P.O. Box Number is Not Acceptable)	<i>6970 Thomas St.</i>		
83			
84 City	<i>Hollywood</i>	85 Zip Code	<i>FL 33024</i>

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		12 NAME	<i>PD Carol Hetesi</i>
STREET ADDRESS		13 STREET ADDRESS	<i>6970 Thomas St.</i>
CITY-ST-ZIP		14 CITY-ST-ZIP	<i>Hollywood, FL 33024</i>
TITLE	<input type="checkbox"/> DELETE	21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		22 NAME	<i>VP Sandor Hetesi</i>
STREET ADDRESS		23 STREET ADDRESS	<i>6970 Thomas St.</i>
CITY-ST-ZIP		24 CITY-ST-ZIP	<i>Hollywood, FL 33024</i>
TITLE	<input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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: *Carol Hetesi / President* 10/3/97 (951) 985-5862

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October 24, 1997

Florida Dept. of State
409 East Gaines St.
Tallahassee, FL 32399

Attn: A. Alan

Re: Hetesi, Inc.
DBA Cafe Old Europe
1842 N. University Dr.
Plantation, FL 33322

Dear Ms. Alan:

On Sept. 16, 1997, I contacted your office to request a blank Corporate annual report because I had not received the preprinted one your office sent earlier. You informed me you would send a new one, and I should mail a payment of 173.75 with the completed report.

I received the blank report and sent the check as instructed. They were both returned on October 16.

I am again returning the form with me payment. Please process the report and send a certificate of status.

Thank You,

Carol Hetesi