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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENTADE STATE

Sandra B. Mortham

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Feb 27 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1997

STREET ADDRESS

SIGNATURE:

appears in Block 12 or Block 13 if changed

POCUMENT # P96000068339 (6)

MORTY'S BAGEL CAFE. INC.

Principal Place of Business Mailing Address 24 S. BOULEVARD OF THE PRESIDENTS 24 S. BOULEVARD OF THE PRESIDENTS SARASOTA FL 34236-1424 SARASOTA FL 34236 3a. Date of Last Report 3. Date Incorporated or Qualified 08/15/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 26 Suite, Apt. #, etc. Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Ζip Country Country This corporation has liability for intangible tax under s. 199.032, Yes 🔲 No 24 30 Florida Statutes 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **B1** Name BURKE, LARRY 24 S. BOULEVARD OF THE PRESIDENTS 82 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34236 83 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 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 protest name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-instating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. 13. DELETE Change Addition 1.1 TITLE THUE **BURKE, LARRY** NAME 1.2 NAME 24 S. BOULEVARD OF THE PRESIDENTS 1.3 STREET ADDRESS STREET ADORESS SARASOTA FL 34236 1.4 CITY - ST - ZIP CHY-ST-ZIP DELETE Change ☐ Addition 2.1 TITLE TITLE BURKE, CHERYL 2.2 NAME NAME 24 S. BOULEVARD OF THE PRESIDENTS 2 3 STREET ADDRESS STREET ADDRESS SARASOTA FL 34236 2 4 City-St-ZiP CITY - ST - ZIE Addition DELETE Change 3.1 TITLE THILE NAME 3.2 NAME 3 3 STREET ADDRESS STREET ADDRESS 3.4. CITY-\$1-ZIP CHY-ST-ZIP Addition DELETE Change 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition THE 51 TITLE NAME **5.2 NAME** 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIF 5.4 CITY - ST- ZIP Addition DELETE Change 6 1 TITLE THEF NAME 62 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 14. I do hereby certly 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

an attachment with an