SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT# P96000078692 (6)

ARCADIA TEA ROOM, INC.

ARCADIA FL 34266

Principal Place of Business 117 WEST OAK STREET

Mailing Address

117 WEST OAK STREET ARCADIA FL 34266

FILED Jul 14 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Zip Country Zip Country Zip Country 28 30 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.							3. Date Incorporated or Qualified					
22. Month part of Business 28. Malinip Address 28. Month part 28. Suite, Apt. #, etc. 29. Suite, Apt. #, etc. 29							09/23/1996					
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28	22		27				5. Certificate of Status Desired	Fee R	equired			
29 20 20 20 20 20 20 20	City & State	8	City & State				6. Election Campaign Financing \$5.00 May Be					
28 28 29 30 Personal Property Tax due June 30 Yes No	23		28									
OROBELLO, MICHAEL F 4107 CORN STREET PORT CHARLOTTE FL 33948 State	Zip	Country	Zip	Cou	ntry		8. This corporation owes or has paid the current year Intangli					
OROBELLO, MICHAEL F 4107 CORN STREET PORT CHARLOTTE FL 33948 81	24	25	29	29 30			Personal Property Tax due June 30.			Yes No		
OROBELLO, MICHAEL F 4107 CORN STREET PORT CHARLOTTE FL 33948 82 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 94 City FL 85 Zip Code 95 Zip Code 96 Zip Code 96 Zip Code 97 Zip		9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent					
### \$107 CORN STREET PORT CHARLOTTE FL 33948 ### \$2 Street Address (P.O. Box Number is Not Acceptable) ### \$2 Street Address (P.O. Box Number is Number	ORO	BELLO, MICHAEL F			81	Name						
PORT CHARLOTTE FL 33948 83				82 Street Addr			ses (P.O. Boy Number is Not Acceptable)				1	
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 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, and screen the obligations of, section 607.0505, Florida Statutes. SIGNATURE Supath, typed or printed name of registered agent and let & applicable. (NOTE Registered Agent separate required when reliability) DATE				102 311			(איני איני איני איני איני איני איני אינ					
11. Pursuant to the provisions of sections 807.0502 and 807.1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and familiar with, and secapt the obligations of, section 607.0505, Florida Statutes. SIGNATURE Text		, 0,13,120,12,12,000,10		!							1	
11. Pursuant to the provisions of sections 807.0502 and 807.1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and familiar with, and secapt the obligations of, section 607.0505, Florida Statutes. SIGNATURE Text					<u> </u>	<u> </u>		=1 =-			-	
11. Pursuant to the provisions of excitons 607.0502 and 607.1508. Florides Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familier with, and accept the obligations of, section 607.0505, Florida Statutes. SIGNATURE SIGNATURE Description amount of provision and vivi a spiketable NOTE Registered Agent signature required when reinstating DATE					84	City	FI ⁶	5 Zip	Code			
12	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.											
12. OFFICERS AND DIRECTORS TITLE OROBELLO, MICHAEL F STREET ADDRESS CITYSTZIP TITLE NAME STREET ADDRESS CITYSTZIP TITLE OROBELLO, MICHAEL F 1.3 STREET ADDRESS CITYSTZIP OROBELLO, MICHAEL F 1.4 CITYSTZIP OROBELLO, MICHAE	SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NC	DTE: Registe	red Age	nt signature require	red when reinstaling) DATE			-	_	
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		artify that the information supplied with	this filing does not qualify for the					the infor	mation		1	

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.

Florida Business Services

120 West Oak Street Arcadia, Florida 34266. (941) 494-2262 Fax (941) 494-5177



July 8, 1998

Florida Department of State Division of Corporations Annual Reports Filings P.O. Box 6327 Tallahassee, Florida 32314-6327

Dear Sir or Madam:

I spoke with someone on the telephone this moming, in reference to the "Second Notice" my client received. I was told to write a letter of explanation along with the payment of \$\$150.00.

We mailed out the first notice with payment, which must of got lost in the mail. The first check written never cleared the bank. So we were told to send \$150.00 payment with the "Second Notice".

Sincerely,

Catherine A. Gadbois

Accountant