4-28-91 B-5595 C FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 28 1997 8:00am Secretary of State

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DOCUMENT 1. Corporation Name	#	P96000082658	(1))

IOP SHI	ELF FUUD MAKI & DELI, II	NU.				
Principal Plac	e of Business	Mailing Address				I TORKHOOM TOO TOTAL BONKS CALLE BOTH ON THE STATE AND THE BANKS THE PARTY OF THE STATE OF THE S
13717 WALSINGHAM ROAD LARGO FL 33774 13717 WALSINGHAM ROAD LARGO FL 33774-3221			•			
						3. Date Incorporated or Qualified 3a. Date of Last Report 10/03/1996
	race of Business	2s. Mailing Address				4. FEI Number Applied For
21	# ala	26	····			59-3405882 Not Applicable
Suite, Apt 22		Suite, Apt. #, etc.				5. Certificate of Status Desired See Required
City & Stat	e	City & State				Election Campaign Financing Trust Fund Contribution Added to Fees
Zιp	Country	Zip	Cou	intry		This corporation has liability for intangible tax under s. 199.032,
24	25	29	30			Florida Statutes Ves No
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Registered Agent
	RCHILL, CHARLINE D			81	Name	
	7 Walsingham Road 30 Fl 33774			82	Street A	Address (P.O. Box Number is Not Acceptable)
	30 12 00// 1			83		
				84	City	FL 85 Zip Code
11. Pursuant office or ragent. La	to the provisions of Sections 607.050 registered agent, or both, in the State rn familiar with, and accept the oblig-	12 and 607, 1508, Florida Statute of Florida. Such change was a ations of, Section 607,0505, Fir	es, the at authorize orida Stat	bove- d by tutes.	named the corp	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
SIGNATURE						
12.	Signature Typed or printed hand of registered ago OFFICERS AN	PREAD THE PROPERTY OF THE PROP	13.	d Agen	t signature	e required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 ()	TLE	T	Change Addition
NAME	CHURCHILL, CHARLINE D		1.2 N/	AME		_
STREEL ADORESS	13717 WALSINGHAM RD.		1.3 ST	TREET A	IDDAESS	
CHY-S1-ZIP	LARGO FL 33774		1.4 CI	IIY-SY	- ZIP	
IBLE	V	☐ DELETE	2111	TLE		☐ Change ☐ Addition
NAME	CHURCHILL, GARY F		2 2 N/	AME		
STREET ADDRESS	13717 WALSINGHAM RD.		2351	TREET A	NDDRESS	
CITY-ST-ZIF	LARGO FL 33774	T DELETE	_	ITY-ST	-ZIP	
Tift F		☐ DELETE	3111			Change Addition
NAME STORE LANGUAGE			32 N/		D\$8500	
STREET ADDRESS CITY - ST - ZIP					IDDAESS	
ITLE		DELETE	4.1 10	ITY-ST	- 218	☐ Change ☐ Addition
NAME		had ween't	4. 2 N			C Vitaligo C Abbullott
STHEET ADDRESS					LODRESS	
CiTY-S1-7iP				TY-ST	ŀ	
1!ILE		☐ DELETE	5.1 TI			Change Addition
NAME			5.2 NA	AME		
STREET ADDRESS			1		LODRESS	
CHY-\$1- 2 02				TY-\$T-		
1) TLE	TO SET THE PERSON NO. THE PERSON NAMED AND ADDRESS OF THE PERS	☐ DELETE	6.1 10			Change Addition
NAME			6.2 NA	AMÉ		
STREET ADORESS			6.3 ST	TREET A	DDRESS	
CITY-ST-ZIP			6.4 Ct	TY-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.