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

**PROFIT CORPORATION** ANNUAL REPORT

CHELSEA'S KITCHEN, INC.



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1998 DOCUMENT # P96000096706 (2)

**FILED** 

Jan 20 1998 8:00am

Secretary of State

Principal Place of Business		Mailing Address					D TOTTO DIFFIC RODEL ADRICA DRIFF COOL
963 CATTLEMAN ROAD 963			53 CATTLEMAN ROAD				
SARASOTA FL 34232			SARASOTA FL 34232			DO NOT WRITE IN T	HO COAOE
						DO NOT WRITE IN THe 3. Date Incorporated or Qualified	113 STAGE
						11/27/1996	
2. Principal F	Place of Business	2a. Mai	ling Address			4. FEI Number	Applied For
21		26	•			65-0723536	Not Applicable
Suite, Apt	. #, etc.	Suit	Suite, Apt. #, etc.				\$8.75 Additional
22		27				5. Certificate of Status Desired	Fee Required
City & State		— <u> </u>	City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be	
23		28		<u> </u>		Trust Fund Contribution	Added to Fees
Zφ	Country	Zip		Country	'	8. This corporation owes or has paid the	
24	25 9, Name and Address of Cur	29 rent Registered	( Agent	[30]		Personal Property Tax due June 30.  10. Name and Address of New Register	Yes No
14/1	ILSON, KATHLEEN R		· rgviii	61	Name	IV. Hame and Address of New Hegister	ov Agent
	3 CATTLEMAN ROAD						·
SARASOTA FL 34232			82	Street Ad	Idress (P.O. Box Number is Not Acceptable)		
	WOOTH I C OTEGE			83			
1							····
				84	City	F	85 Zip Code
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 registers 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							
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	•						
<b></b>	Signature, typed or printed name of registered			E Registered Age	nt signature req	ouired when reinstating) DAY	·
12.	T	ND DIRECTOR	S DELETE	13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	D WAS CONTRIVEN		DECETE	1.1 TITLE			L_  Change
NAME STREET ADDRESS	WILSON, TIMOTHY N 9023 61ST AVENUE DRIVE	FACT		1.2 NAME			
' ' ' ' ' ' '	BRADENTON FL 34202	EMOI		1.3 STREET	1		
CITY-ST-ZIP TITLE	D D D		DELETE	1.4 City-S 2.1 Title	1-ZIP		Change Addition
NAME	WILSON, KATHLEEN R			2.2 NAME			Li Ondigo Li Addition
STREET ADDRESS 9023 61ST AVENUE DRIVE EAST				2.3 STREET	ADDRESS		
CITY-ST-ZIP	BRADENTON FL 34202			2. 4 CHTY-5	.		
TIPLE			DELETE	3.1 TITLE			Change Addition
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET	ADDRESS		
City-St-ZiP				3.4. CITY - 9	T-7IP		•
TATLE			DELETE	4.1 TITLE			Change Addition
NAME				4. 2 NAME			
STREET ADDRESS				4.3 STREET	ADDRESS		
CITY-ST-ZIP				4.4 CITY-S	I - ZIP		
TITLE			☐ DECETE	51 TITLE			Change Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET	ADDRESS		
CITY-ST-ZIP			Drugge	5.4 City - S	I - ZIP		
TITLE			☐ DELETE	61 TITLE			Change Addition
NAME CIRCLI ADDRESS				6.2 NAME	1000caa		
STREET ADDRESS				6.3 STREET	1		

14. Thereby 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 the production of the control with an eddress.