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

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000101753 (7)

SWISS SAUSAGE HAUS, INC.

Principal Place of Business Mailing Address 368 INDUSTRIAL BLVD 368 INDUSTRIAL BLVD NAPLES FL 33942 NAPLES FL 33942 2. Principal Place of Business 2a. Mailing Address

FILED
Jul 09 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

3. Date Incorporated or Qualified

12/12/1996 4. FEI Number

21	26				65-0717777	Not Applicable			
Suite, Apt.	te, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	•	3.75 Additional Fee Required	
City & Stat	City & State City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip	Country	Zip							
24	25	29	30			This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
HERRMANN, ANDRE					81 Name				
388 INDUSTRIAL BLVD NAPLES FL 33942 SWISH SAUSAGE HAUS, INC. 368 Industrial Blvd.				82 Street Address (P.O. Box Number is Not Acceptable)					
				83					
	Naple	s, Florida 34104		84	City	FL	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 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 little if applicable (NOTE: Registered Agent signature required when reinstating) DATE									
12.		ND DIRECTORS	13		gork bigriato o requi	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D			TILE		ABBITIONS/OFFICE OF OFFICERS AN		hange Addition	
NAME	MULLIN, LOUISA V	C 00		IAME				mange Audition	
STREET ADDRESS	368 INDUSTRIAL BLVD		1.3 S	TREET	ADDRESS				
CITY-ST-ZIP	NAPLES FL 33942		1.4 0	HTY-ST	-ZIP				
TITLE	D	DE	LETE 2.1 T	ITLE			CI	hange Addition	
NAME	H ERR MANN, ANDRE		2.2 N	IAME	İ				
STREET ADDRESS	368 INDUSTRIAL BLVD		2.3 \$	TREET	ADDRESS				
CITY-ST-ZIP	NAPLES FL 33942		2.4 C	ITY-ST	ZIP				
TITLE		DE	LETE 3.1 T	TLE			CI	nange Addition	
NAME			3.2 N	AME					
STREET ADDRESS			3.3 S	TREET	address				
CITY-ST-ZIP				ITY-ST-	210				
TITLE		DE	LETE 4.1 T	ITLE			Cł	nange	
NAME			4.2 N	IAME					
STREET ADDRESS			4.3 S	TREET	ADDRESS			1	
CITY-ST-ZIP				ITY-ST-	ZIP				
TITLE		☐ DE	LETE 5.1 T	ITLE			Cł	nange Addition	
NAME			5.2 N	AME					
STREET ADDRESS			5.3 8	TREET	ADDRESS				

CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I 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 suppliemental 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 of 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 chapted, or on an attachment with an address.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE

JUL 0 6 1998

Change Addition