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).

ÇOF ANNU	PROFIT PR	Sandra B Secretar	RTMENT OF STATE Mortham y of State CORPORATIONS	APPROVED FILED
DOCUMENT # P9700002653 (8) 1. Corporation Name P97000002653 (8) HONOR'S CAFE, INC.				98 OCT 29 PM 2:53 SECRETARY OF STATE TALLAHASSEE FLORIDA
Principal Place of Business Mailing Address				
2836 FILLMORE ST. HOLLYWOOD FL 33020 HOLLYWOOD FL 33020				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
				01/10/1997
2. Principal Place of Business 2a. Mailing Address 21 26				4. FEI Number Applied For Not Applied For Not Applied For
Suite, Apt. #, etc Suite, Apt. #, etc.			-	5 Certificate of Status Desired \$8.75 Additional
City & State City & State				Fee Required
23 28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25 9. Name and Address of Curre		30	Personal Property Tax due June 30. X Yes No 10. Name and Address of New Registered Agent
FILINGS, INC. 3732 N.W. 16TH STREET FT. LAUDERDALE FL 33311-4182 Street Address (P.O. Box Number is Not Acceptable) 9831 84 City Con AL SPRINGS FL 85 Zip Code 333314				
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 Lewis Andrews 10-20-98				
12.	Signature, typed or printed name of registered ag OFFICERS A	ent and title if applicable. (NOT ND DIRECTORS	TE: Registeros Agent signature 13.	e required when reinstalling) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D - /	DELETE	1.1 TITLE _	Change Addition
NAME STREET ADORESS	TULLY, HONOR B 2836 FILLMORE ST)	1.2 NAME 1.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL-33020	<u> </u>	1.4 CITY-ST-ZIP 2,1 TITLE	
TITLE NAME		☐ DELETE	2.2 NAME	700002679587
STREET ADDRESS			2.3 STREET ADDRESS	-11/03/9801098001
CITY-ST-ZIP			2.4 CITY-ST-ZIP	****150.00 <u>*</u> ****150.00
TITLE		DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
CITY-ST-ZIP TITLE		DELETE	4.1 TITLE	Change Addition
NAME		DELETE	4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
ППЕ		DELETE -	5.1 ΤΠΊLΕ	Change Addition
NAME			5.2 NAME	1 de la companya della companya della companya de la companya della companya dell
STREET ADDRESS			5.3 STREET ADDRESS	Vin-29-98
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	Change Addition
NAME			S 2 NAME	Addition

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 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 charged, or on an attachment with an address.

SIGNATURE:

6.3 STREET ADDRESS

HONOR B. TUlly St 28-36-Fillings 020: 294 Florida Department of State. I have received a 2 not notices with late fee's. I never received a first notice. I would like the late fee's to be dropped. Honor Sully

-