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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000024331 1. Corporation Name
ENGLISH MUFFIN OF FLORIDA IN

Principal Place of Business 3541 U.S. 441 3245 HOLLYWOOD FL 33023

45)

Mailing Address

3541 U.S. 441 (3 45) HOLLYWOOD FL 33023

FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90078 002 ***150.00

Addition

Addition

☐ Change

Change

					DO 1	IOT WRITE IN TH	IS SPACE	
				•	3. Date Incorporated or Qualifed 03/17/1997			
2. Principal F	Place of Business	2a. Mailing Add	ess		4. FEI Number		Ap	plied For
21		26			650750513	5	No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 22 City & State City & State 23 28			#, elc.		5. Certificate of Status C		Fee Required	
					Election Campaign For Trust Fund Contribution			
Zip	Country	Zip	Cou	ntry	8. This corporation owe	s the current year	ntangible	
24	25	29	30		Personal Property Ta	x .	☐ Yes	□No
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address	of New Registers	d Agent	
354	NLE, JOHN P 1 SW 60TH AVE	y Grez,		81 Name 82 Street Add	ess (P.O. Box Number is Ne	i Acceptable),		
				84 City		F		-
Office of i		te of Florida. Such chan gations of, Section 607.0	ge was authorized 1505, Florida Statu	by the corporation	on's board of directors. I here	it for the purpose oby accept the app	of changing its pointment as reg	registered pistered
	Signature, typed or printed name of registered a			igent signature require		DATE	 	
12.	, \/	AND DIRECTORS	13.		ADDITIONS/CHANGE			
TITLE NAME	SHALE, JOHN P 34		ELETE 1.1 TITI 12 NAI	1	w chain	- -	Change	Addition
STREET ADDRESS	3541 SW 60TH AVE	•	1351	EET AOORESS	V	•		
CITY-ST-ZIP	HOLLYWOOD FL 33023		14 CIT	/-ST-ZIP				
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NAME	İ		2.2 NA	E	L		. —	
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CITY-ST-ZIP]			Y-ST-ZIP			•	
TITLE		□ 01	LETE 3.1 TITL				: Change	Addition
NAME		¥ ∓T-1	32 NAA	-			`	
STREET ADDRESS	1			_				
				EET ADDRESS				
CITY-ST-ZIP				r-ST-ZIP			Channe	ofished [T]

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 changed, or on an attachment with an address, with all other like empowered.

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

64 CITY-ST-ZIP

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

8.1 TITLE

☐ DELETE

☐ DELETE

SIGNATURE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

CITY-ST-ZIP

TILE