

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

FILED
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90107 024 ***158.75

DOCUMENT # P97000031635

1. Corporation Name

OUR DAILY BREAD BOOK STORES INC

Principal Place of Business

1800 N ANDREWS AVE., 7-K
FORT LAUDERDALE FL 33311

Mailing Address

1800 N ANDREWS AVE., 7-K
FORT LAUDERDALE FL 33311

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/08/1997

4. FEI Number

65-0742585

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing



\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax.

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SANDHOLZER, GILBERT E
1800 NORTH ANDREWS AVE.
STE. 7K
FORT LAUDERDALE FL 33311

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME SANDHOLZER, GILBERT E II
STREET ADDRESS 1800 N ANDREWS AVE., 7-K
CITY-ST-ZIP FORT LAUDERDALE FL 33311

1.1 TITLE VICE President ☐ Change ☒ Addition
1.2 NAME William Felix
1.3 STREET ADDRESS 1800 North Andrews Ave 7K
1.4 CITY-ST-ZIP FT. Lauderdale FL 33311

TITLE T ☐ DELETE
NAME HERVE BEARLIEU
STREET ADDRESS 1800 N ANDREWS AVE., 7-K
CITY-ST-ZIP FORT LAUDERDALE FL 33311

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE V ☐ DELETE
NAME MICHAEL A SANDHOLZER
STREET ADDRESS 11 CROSSINGS CIRCLES., APT E
CITY-ST-ZIP BOYNTON BCH FL 33435

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE V ☐ DELETE
NAME AMY C JONES
STREET ADDRESS 11 KIRKBY TRL
CITY-ST-ZIP FAIRPORT NY 14450

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE V ☐ DELETE
NAME TESS SANDHOLZER
STREET ADDRESS 6419 BIRCH LANE
CITY-ST-ZIP LANTANA FL 33462

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE V ☒ DELETE
NAME MICHAEL J VERMILYA,
STREET ADDRESS 1800 N ANDREWS AVE., 7-K
CITY-ST-ZIP FORT LAUDERDALE FL 33311

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)