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FILED
May 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000049503 (0)

1. Corporation Name

AFTERNOON DELITE DELI AND BAKERY INC.



Principal Place of Business

932 GONDOLIER BLVD
GULF BREEZE FL 32561

Mailing Address

PO BOX 972
GULF BREEZE FL 32562

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/29/1997

2. Principal Place of Business

21 3035 GULF BREEZE PKWY 26 3035 GULF BREEZE PKWY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

GULF BREEZE, FL

23

City & State

GULF BREEZE FL

24

Zip

32561

Country

USA

25

Zip

32561

Country

USA

29

City & State

GULF BREEZE FL

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City & State

GULF BREEZE FL

31

Zip

32561

Country

USA

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City & State

GULF BREEZE FL

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City & State

GULF BREEZE FL

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32561

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City & State

GULF BREEZE FL

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GULF BREEZE FL

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City & State

GULF BREEZE FL

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Zip

32561

Country

USA

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City & State

GULF BREEZE FL

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City & State

GULF BREEZE FL

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Zip

32561

Country

USA

9. Name and Address of Current Registered Agent

BAKER, BARBARA J
932 GONDOLIER BLVD
GULF BREEZE FL 32561

10. Name and Address of New Registered Agent

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

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
BAKER, BARBARA J
PO BOX 972 N/A
GULF BREEZE FL 32562

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
PRESIDENT
932 GONDOLIER BLVD
GULF BREEZE, FL 32561

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ 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 changed, or on an attachment with an address.

SIGNATURE

BAKER, BARBARA J

850-916

CR2E034 (10/97)