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



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #
1. Corporation Name P97000062933 (1)

DELI DELIGHTS INC.

000	- Leu	• /	00
V13/1	Lu	uas	Dell

SIGNATURE:

FILED Aug 31 1998 8:00am Secretary of State



1 morpar i loc	o or Dysmoss	Maining Address		}	
304 US1 304 US1					
NORTH MIAMI BEACH FL 33408 NORTH MIAMI BEACH FL 33408		33408	DO NOT WRITE IN THI	IO DDACE	
1					SOFACE
Lucia's Deli				3. Date Incorporated or Qualified	
Dripping S	cas seco	2a Malling Address		07/18/1997 4. FEI Number	1 (4 1: 15
2. Principal P	lace of Business	2a. Mailing Address		65-0774462	Applied For
Suite, Apt.	ast_		<u></u>	165 0119902	Not Applicable
22		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23/7 (164)	In Beach	28 North Pal	n Block	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 33分	408 25 P. Beal	zip 33408	30 Poperal	This corporation owes or has paid the cu Personal Property Tax due June 30.	romt year Intangible Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	Agent
MILA	ZZO, SHELLY		81 Name	1 1 00	
304			82 Street Add	long shelly	
NOR	ITH MIAMI BEACH FL 33408	iress (P)). Box Mulphar is Not Acceptable			
	•		83 1/00	the folm Beach	
Whong address 84 City			Elmila) FI	85 Zip Code	
11. Pursuant office or	t to the provisions of sections 607.0502 a registered agent, or both, in the State o	and 607.1508, Florida Statute f Florida. Such change was a	s, the above-named corp- juthorized by the corporal	oration submits this statement for the purpose of cition's board of directors. I hereby accept the appo	hanging its registered
agent. I a SIGNATURE	am familiar with, and accept the obligati	ons of, section 607.0505, Flo	orida Statutes.	8/167	98
	Signature, typed or printed name of registered agent a		TE: Registered Agent signature re		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	MILAZZO, SHELLY		1.2 NAME		
STREET ADDRESS	304 US1		1.3 STREET ADDRESS		
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33408		1.4 CITY-ST-ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition
NAME	Wrogastre	1	2.2 NAME		
STREET ADDRESS	WY / CAN		2.3 STREET ADDRESS		
CITY-ST-ZIP	000		2.4 CiTY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			. 3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 City-St-ZiP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME	8000026319	aTJi:3° —
STREET ADDRESS			5.3 STREET ADDRESS	-09/02/9801066 ***150.00	0 23
CITY-ST-ZIP			5.4 CITY-ST-ZIP	***15U_00	
TITLE		DELETE	6.1 TITLE		Change Avidition
NAME		r bereig	6.2 NAME		- cuaride Fibbliogian
STREET ADDRESS		•	6.3 STREET ADDRESS) '1,'p'
i	1				" 4,"
CITY-ST-ZIP	artifu that the information cumplied with the	is filing does not qualify for th	6.4 City-St-ZiP	clion 119.07(3)(i), Ftorida Statutes. I further certify	that the information
indicated of an officer of	on this annual report or supplemental and or director of the corporation or the receipt of Block 13 if changed, or on an aluck	yhual report is true and accur iver or trustee empowered to	ate and that my signature execute this report as re	e shall have the same legal effect as if made und equired by Chapter 607, Florida Statutes; and th <u>a</u>	ler oath; that I am

8/15/98 Denisos of Corporation ie from Jula Um e ond 2 8150, g flingteen a "flingteen tied the figured I might have might up with as luginess pay my le time and my Chedit I would not, want of Lelp. Ima n This is my first Inced all the Can get

Carribean Castaway Charters, Inc. DBA Sea Tow Key West P.O. Box 5549 Key West, FL 33045

To whom it may concern,

Per our phone conversation with your department, we are notifying you that we did not receive our annual renewal forms. We had a change of address and think that probably was the cause. We requested forms to be sent on four separate occasions and have still not received them.

Per your instructions, we have copied last years forms, making corrections and signing. Enclosed also is our check for \$150.00. Please let us know if you need anything else. Thank you.