

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

FILED

Feb 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000075598 (7)

1. Corporation Name

CITY SOFT DOUGHNUTS, INC.

Principal Place of Business

10729 NASHVILLE DRIVE
COOPER CITY FL 33026

Mailing Address

10729 NASHVILLE DRIVE
COOPER CITY FL 33026

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/02/1997

4. FEI Number

65-0779726

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

21. 4100 NW 17th Ave

Suite, Apt. #, etc.

22. Miami, FL

City & State

23. 33147

Zip

25. Dade

County

26. 4100 NW 17th Ave

Suite, Apt. #, etc.

27. Miami, FL

City & State

28. 33147

Zip

30. Dade

County

9. Name and Address of Current Registered Agent

ELLIOTT, TERRY
4101 NW 17 AVE
MIAMI FL 33147

10. Name and Address of New Registered Agent

81. Name

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

4100 NW 17 Avenue

83.

84. City

Miami

FL

85. 33147

11. Pursuant to the provisions of Sections 607.0402 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

Sherrin Elliott

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	ELLIOTT, TERRY
STREET ADDRESS	4101 NW 17 AVE
CITY-ST-ZIP	MIAMI FL 33147

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	V.P.
1.2 NAME	Elliott, Terry
1.3 STREET ADDRESS	4100 NW 17 Avenue
1.4 CITY-ST-ZIP	Miami, FL 33147

2.1 TITLE	President
2.2 NAME	Sherrin Elliott
2.3 STREET ADDRESS	4100 NW 17 Avenue
2.4 CITY-ST-ZIP	Miami, FL 33147

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

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

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

6.1 TITLE	
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.

SIGNATURE:

Sherrin Elliott

2-10-98 (305) 637-1112

CR2E034 (10/97)