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

**PROFIT** CORPORATION : ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000080581 (6)

IN HOUSE DESSERTS, INC.

## **FILED** Apr 07 1998 8:00am Secretary of State



		· · · · · · · · · · · · · · · · · · ·					
Principal Place of Business Mailing Address							1581 3881
2500 E. ATLANTIC BLVD. 2500 E. ATLANTIC BLVD.							
POMPANO BEACH FL 33062 POMPANO BEACH FL 330					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					09/17/1997		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Nurnber	Applied	d For
21		26			65-0782174	Not Ap	oplic <b>a</b> ble
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	<b>\$8.75</b> Addit	
City & Stat		27 City 8 Ctata				Fee Require	
23	lo .	City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May	
Zip	Country	7(0)	Country	<u> </u>	This corporation owes or has paid		
24	25	29	30		Personal Property Tax due June 3		
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Reg	istered Agent	
	AQORE, DAVID		81	Name	HOUSE, Flizab	etn	
	i379 N. DIXIE HWY.		82	Street A	ddress (P.O. Box Number is Not Acceptable		
<b>F</b>	FORT LADIBÉRDALE FL 33334		L	١١		race	
			83	1			
			84	City .	0 60	85 Zip Code	e
				' 1	Pompano Beach corporation submits this statement for the pu	- FL   3304	00
agent i a SIGNATURE	m ramiliar with and accept the obligat	tions of, Section 607.0505, Flor	ida Statute	<b>S</b> .	equired when reinstaling)	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE		
TITLE	D HOUSE ELIZABETH	☐ DELETE	1.1 TITLE	l		☐ Change ☐	Addition
NAME	HOUSE, ELIZABETH 1340 SE 6TH TERRACE		1.2 NAME				
STREET ADDRESS	POMPANO BEACH FL 33060	1		ADDRESS			
CITY-ST-ZIP TITLE	TOM AND DEADITY 2 30000	DELETE	21 TITLE	ST-ZIP		Change	Addition
NAME			2 2 NAME			□ criange □	) Madridan
STREET ADDRESS			2.3 STREET	T ADDRESS			
CITY-S1-ZIP			2 4 City-				
TITLE	•	DELETE	3.1 TITLE	<u> </u>		☐ Change ☐	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-\$1-ZIP			3.4. CITY-	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			☐ Change ☐	Addition
NAME			4. 2 NAME	ļ			
STREET ADDRESS			4.3 STREET				
CITY-ST-ZIP		Drifte	4.4 CITY-5	31 - ZIP			4.200
TITLE		☐ DELETE	5 1 TITLE			☐ Change ☐	Addition
NAME CARLET ADDOCCO			5.2 NAME				
STREET ADDRESS			5.3 STREET				
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - S 6.1 TITLE	51 - ZIP		Change	Addition
NAME			6.2 NAME			∟ crange L.J	) Modifion
STREET ADDRESS			6.3 STREET	Annaree			
CITY-ST-ZIP			6.4 CITY - S	İ			
	certify that the information supplied with	this filing does not qualify for	the exemp	tion stated	I in Section 119.07(3)(i), Florida Statutes. I fu	orther certify that the infor-	rmation

indicated on this annual report or suppliemental annual report is frue and accurate and that my signature shall have the same legal effect as if made under eath; 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:** 

2/25/91

781-5733