:COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Jul 09, 1999 8:00 am Secretary of State

07-09-1999 90020 025 ***150.00

OCUMENT # P98000014532

923, INC. Mailing Address incipal Place of Business 64 BISCAYNE BOULEVARD 11064 BISCAYNE BOULEVARD MI FL 33161 MIAMI FL 33161 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/13/1998 2a. Mailing Address 4. FEI Number Applied For Principal Place of Business Not Applicable 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees -Trust Fund Contribution 28 Zip Country Country Zip This corporation owes the current year Yes Intangible Personal Property. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CAPITAL CONNECTION, INC. 417 E. VIRGINIA ST. STE. 1 TALLAHASSEE FL 32301 83 84 City 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. sec (NOTE: Registered Agent signature required when reinstating) or printed name of registered agent and title if applicable (2/3)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 1.1 TITLE DELETE Addition CR2E034 BERMAN, JEROME 1Ε 1.2 NAME 11064 BISCAYNE BOULEVARD FET ADDRESS 1.3 STREET AODRESS **MIAMI FL 33161** 1.4 CITY-ST-ZIP -ST-ZIP 2.1 TITLE DELETE Change Addition BERMAN, KATHY 2.2 NAME IF 11064 BISCAYNE BOULEVARD BET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33161** 2.4 CITY-ST-ZIP 'ST-ZIF Ε DELETE 3.1 TITLE Change Addition 3.2 NAME ۱F 3.3 STREET ADDRESS FET ADDRESS 3.4 CITY-ST-ZIP 'ST-ZIF DELETE 4.1 TITLE Change Addition 4.2 NAME Έ EET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP -ST-ZIP 5.1 TITLE Ε DELETE Change Addition 5.2 NAME 5.3 STREET ADDRESS SET ADDRESS

I hereby certify that the information supplied with this filling 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.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

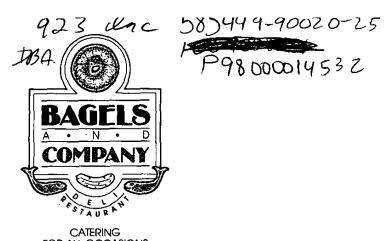
GNATURE: X

-ST-ZIF

Ε ET ADDRESS

Change

____ Addition



CATERING FOR ALL OCCASIONS

7/5/95 To whom It may Concern, I cannot find the original cop amond report. Ether it was nown delivered or was lot in the mul. flene except my check for \$150,00 cm Mank ym, April Ber

Many People who live into our sness have had problems with smil that was mit delivered.

892-2435 89-BAGEL 11064 BISCAYNE BLVD., MIAMI, FL 33161 FAX 892-6726