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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000048226

1. Corporation Name

BAGELS AT THE BEACH, INC.

Principal	Place	of	Business
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Mailing Address

215 MISTY COURT

215 MISTY COURT

## May 06, 1999 8:00 am Secretary of State

05-06-1999 90276 016 \*\*\*150.00



DESTIN FL 32541	DESTIN FL 32541	DESTIN FL 32541		DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualifed			
				05/26/1998			
2. Principal Place of Business	2a. Maiting Address	_		4. FEI Number		Applied For	
1 405-D Hwy 98	E. 26 405-D Hwy 9	8	<b>5</b> ,	59-3516915		Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	·	75 Additional e Required	
City & State 23 Destin FL	City & State  28 Des Tin FL	•		6. Election Campaign Financing Trust Fund Contribution	-	00 May Be ded to Fees	
Zip Country 24 3254 25 US1		Intry	A	This corporation owes the current year Interpretation     Personal Property Tax.	angible Yes	□No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
		81	Name				
Barth, James C 30 South Shore Drive		82	82 Street Address (P.O. Box Number is Not Acceptable)				
DESTIN FL 32541	,	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	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	D DELETE	1,1 TITLE	☐ Change ☐ Addition					
NAME	BROCKMAN, PEGGY P	1.2 NAME						
STREET ADDRESS	215 MISTY COURT	1.3 STREET ADDRESS						
CITY-ST-ZIP	DESTIN FL 32541	1.4 CITY-ST-ZIP						
TITLE	D DEFELE	2.1 TITLE	☐ Change ☐ Addition					
NAME	BROCKMAN, WILLIAM H	2.2 NAME						
STREET ADDRESS	215 MISTY COURT	2.3 STREET ADDRESS						
CITY-ST-ZIP	DESTIN FL 32541	2.4 CITY-\$T-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 ADORESS	•					
CITY-ST-ZIP		4.4 CITY-ST-ZIP						
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition					
NAME		5.2 NAME						
STREET ADDRESS		5.3 STREET ADDRESS						
CITY-ST-ZIP		5.4 CITY-ST-ZIP						
ΠLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition					
NAME		6.2 NAME						
STREET ADDRESS		6.3 STREET ADDRESS						
CITY OF 78D		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, with all other like empowered.

SIGNATURE:

850-865-1324