

**2007 FOR PROFIT CORPORATION-
ANNUAL REPORT**

FILED
Feb 07, 2007 08:00 AM
Secretary of State

DOCUMENT # P98000056295

1. Entity Name
SOUTH FLORIDA DONUTS, INC.



Principal Place of Business
5641 OKEECHOBEE BLVD
WEST PALM BEACH, FL 33417

Mailing Address
5641 OKEECHOBEE BLVD.
WEST PALM BEACH, FL 33417



01312007 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0859619

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

RUBIANO, STEVEN
108 VILLA BELLA
JUPITER, FL 33458

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME RUBIANO, STEVEN
STREET ADDRESS 108 VILLA BELLA
CITY-ST-ZIP JUPITER, FL 33458

TITLE D
NAME RUBIANO, SUSAN
STREET ADDRESS 108 VILLA BELLA
CITY-ST-ZIP JUPITER, FL 33458

TITLE D
NAME SOUSA, JOSE
STREET ADDRESS 15723 CYPRESS PARK DR
CITY-ST-ZIP WELLINGTON, FL 33414

TITLE D
NAME SOUSA, ELIZABETH
STREET ADDRESS 15723 CYPRESS PARK DR
CITY-ST-ZIP WELLINGTON, FL 33414

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000625098
02/14/07-80061-022 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STEVEN RUBIANO

1/31/07

Date

(561)697-9337

Daytime Phone #