: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

IGNATURE:



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Jul 08, 1999 8:00 am Secretary of State 07-08-1999 90015 003 ***150.00

402-898-1616

	P98000079971
JULIUMENI #	$\square \square $
JOOGINIE I II	PUXIIIIII/UU/I
Comparation Name	

. Corporation	n Name	010011				
MAD-LYN	N'S, INC.					
	, -, -, -				1 (2011) 00: 100 (2012) (2014) 40(1) 40(1) 40(1) 40(1) 40(1) 100(1) 100(1) 100(1)	1)
				/		4
rincipal Place	e of Business	Mailing Address				11
N MILLS A	V E	932 N MILLS AVE				
LANDO FL 32803 ORLANDO FL 32803					DO NOT INDITE IN THE OBJECT	
					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	\neg
,					09/10/1998	
Principal Place of Business 2a. Mailing Address				4. FEI Number Applied For	\dashv	
Principal Place of Business 2a. Mailing Address 26				59- 353 26 02 Not Applicat	─ ┤	
Suite, Apt. #, etc. Suite, Apt. #, etc.					S8 75 Additional	
27				-	5. Certificate of Status Desired Fee Required	
City & Stat	e	City & State			6. Election Campaign Financing \$5.00 May Be	
		28			Trust Fund Contribution Added to Fees	_
Zip	Country	Žip	Counti	у	8. This corporation owes the current year Intangible Personal Property. Yes No	
	25	29	30			_
_	9. Name and Address of Curre	ent Registered Agent	8	1 Name	10. Name and Address of New Registered Agent	
ABLII	NG, MADELIENE C		_ ا	112/	ddress (P.O. Box Number is Not Acceptable)	
	E CONCORD ST #300		8.	2 Street A	ddress (P.O. Box Number is Not Acceptable)	,
	ANDO FL 32801		8	3 286	of Plaza Terrace Dr	\dashv
			Ľ			
			8	4 City	oclando FL 85 Zip Code 32803	
1. Pursuant	to the provisions of sections 607.05	02 and 607 1508. Florida Statute	es the abov	e-named col	poration submits this statement for the purpose of changing its registered	\dashv
office or	registered agent, or both, in the Stat	te of Florida. Such change was a	authorized b	y the corpor	ration's board of directors. I hereby accept the appointment as registered	
-	am familiar with, and accept the obli	gations of, section 607.0505, Fi	orida Statuti	2 S.	7-1-99	Ì
IGNATURE	Signature, typed or printed name of registered as	3	OTE: Registered	Agent signature	7-/-99 required when reinstating) DATE	=
2.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	ଞ
LE	X TD	DELETE	1,1 TITLE	1	VTD Addit	ion S
ME	BACHINER, SUSAN C		1.2 NAME	:	-	3
REET ADDRESS	99 2-N MILLS AVE		1.3 STRE	ET ADDRESS	2801 Phiza Terrace Dr Orlando, Fl 32803	F (5/99)
Y-ST-ZIP	ORLANDO FL 32803		1.4 CITY-	ST-ZIP	Orlando, Fl 32803	— წ
LE	XSD	DELETE	2.1 TITLE		PSD K Change Addit	ion
ME	BARCASKI, LILLIAN A		2.2 NAME			
REET ADDRESS	932 N MILLS AVE			ET ADDRESS	2801 Plaza Terrace Dr Orlando, Ft 32803	
Y-ST-ZIP	ORLANDO FL 32863		2.4 CITY- 3.1 TITLE		Orlando, Fl 32803	-
le	i e	☐ DELETE		1	L_J Change L_J Addit	ion
ME	<u></u>		3.2 NAME	ł		
REET ADDRESS				ET ADDRESS		
Y-\$T-ZIP	***		3.4 CITY-	-		
LE		L DELETE	4.1 TITLE	1	Change Addit	.on
ME				1		
REET ADDRESS				ET ADDRESS		Į
TY-ST-ZIP LE			4.4 CITY- 5.1 TITLE		Change Addit	ion
	}	DELETE	5.2 NAME		Change Addit	1011
ME DEET ADDRESS				ET ADDRESS		
REET ADDRESS						
Y-ST-ZIP LE			5.4 CITY- 6.1 TITLE		Change Addit	ion
		☐ DELETE	6.2 NAME		Change Addit	100
ME DEET ADDRESS			4			
REET ADDRESS				ET ADDRESS		
Y-ST-ZIP	ertify that the information supplied wi	th this filing does not qualify for t	6.4 CITY-	n stated in s	section 119.07(3)(i), Florida Statutes. I further certify that the information	
indicated of an officer	on this annual report or supplements	al annual report is true and accu receiver or trustee empowered t	rate and tha	it my signati	ure shall have the same legal effect as if made under oath; that I am required by Chapter 607, Florida Statutes; and that my name appears	

Stephen E Roberts, P.A.

P98000079971 583367-90015-3

Professional Accounting and Tax Services 701 E Washington Street Orlando, FL 32801

OFFICE 407-246-0073 FACSIMILE 407-246-1991

July 2, 1999

Division of Corporations Annual Reports Filings POB 1500 Tallahassee, Fl 32302-1500

Dear Sir/Madam:

Mad-Lyn's, Inc. never received the first annual report to file with your office timely. We are requesting that you accept this filing with corrected addresses for the corporation as a timely filing with no penalty charged. A check is enclosed as payment on the account.

If you have any questions, please feel free to call me directly. I have been instructed to provide you with any information you need to resolve this matter.

Sincerely,

C:\SERPA\mad lynns coconut cafe inc.wpd .