SECOND 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

DOCUMENT # P98000085427 L

KNOCKOUT BAGELS, INC.

FILED Sep 23, 1999 8:00 am Secretary of State

09-23-1999 90008 011 ***150.00



Principal Place of Business Mailing Address						(1984) 119 18181 18111 68114 88114 88114 88114 88111 8181 8111 8811 1881 1881 1881
18113 105TH A	VENUE. SOUTH	18113 105TH AVENUE, S	18113 105TH AVENUE, SOUTH			·
BOCA RATON FL 33498		BOCA RATON FL 33498	BOCA RATON FL 33498			DO WOTH WOLTE IN THE COLOR
						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified 10/02/1998
2 Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number Applied For
21	200 0. 200/1000	26				(25-0872673 Not Applicable
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.				S8 75 Additional
22		27	27			5. Certificate of Status Desired Fee Required
City & State	•	City & State	City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution	
Zip	Country	Zip	\vdash	Country		8. This corporation owes the current year
24	25	29	30	30		Intangible Personal Property.
<u> </u>	9. Name and Address of Curre	nt Registered Agent		81	Name	10. Name and Address of New Registered Agent
ENGLER, CRAIG				"	Name	
	13 105TH AVENUE, SOUTH		82 Stree		Street Add	dress (P.O. Box Number is Not Acceptable)
	A RATON FL 33498					7774
				83		<u></u>
				84	City	FL 85 Zip Code
44	he was delicated and applicate COT OFC	O and COZ 4EOO Elorido Statut	on the sh			oration submits this statement for the purpose of changing its registered
office or r	egistered agent, or both, in the State	e of Florida. Such change was	authorize	d by	the corporat	tion's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the oblig	ations of, section 607.0505, F	lorida Sta	tutes	•	
SIGNATURE _	Signature, typed or printed name of registered age	nt and title if applicable. (N	IOTE: Registe	red Ac	ent signature rec	equired when reinstating) DATE
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD DELETE		1.1 TI	1.1 TITLE		Change Addition
NAME	ENGLER, MAC		1.2 N/	1.2 NAME		
STREET ADDRESS	ET ADDRESS 18113 105TH AVENUE, SOUTH		1.3 STREET ADDRESS		ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33498		1.4 CITY-ST-ZIP		-ZIP	
TITLE	VPD DELETE		2,1 TI	2.1 TITLE		Change Addition
NAME	ENGLER, CRAIG		2.2 N	2.2 NAME		
STREET ADDRESS	18113	Ή	2.35		ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33498		2.4 Ci	2.4 CITY-ST-ZIP		
TITLE	L OCCETE		3.1 TI	3.1 TITLE		Change Addition
NAME	ENGLER, CAROL		3.2 N/	3.2 NAME		
STREET ADDRESS	BOCA DATON EL 00400		3.3 \$1	REET	ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33498			3.4 CITY-ST-ZIP		
TITLE		DELETE	4.1 TI			Change Addition
NAME			4.2 N			
STREET ADDRESS			1		ADDRESS	
CITY-ST-ZIP	<u></u>		_	TY-ST-	ZIP	
TITLE		DELETE	5.1 TI			Change L Addition
NAME			5 2 N		*DD0550	
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			5.4 CI 6.1 TI	TY-ST-	2117	Character T August
TITLE		L DELETE	1			Change Addition
NAME			6.2 N/		40000000	İ
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP	rtify that the information supplied with	this filing does not qualify for		TY-ST-		ction 119 07(3)(i). Florida Statutes, I further certify that the information

4. 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.

SIGNATURE

SIGNATURE AND YPED OR PRINTED NAME OF SIGNING OFFICER OR DIREC

Date

Davtime Phone #

To whom it may concern; 619267-90008-11 I am writing this letter regarding my annual Filing Fee for my Corporation. my accountant was suppose to take care of this but he disappeared and I never received the filing form After I constantly tried to contact book the finally sent me my work back. I forgot all about the form until it was too late. I am asking you it you can forgive the lade filing and please leap my company active.

Sincerely, Crais Engler