Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90066 026 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUN	MENT # P98000	0088356						
1	REEF DONUTS, INC.				1	~ "		
Principal Place		Mailing Address						
i 11790 n. Kendi I miami fil 33186		11790 N. KENDALL DRIVE MIAMI FL 33186						
1 11111711 712 43700					DO NOT WRITE IN THIS	SPACE		
					3. Date Incorporated or Qualifed 10/15/1998		{	
O. Defects at Di	and of Discipance	Za. Mailing Address			4. FEI Number	T Apr	fied For	
2. Principal Pi	ace of Business	25			1.5-0875930	Not	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A		,
22		27				Fee Re		
City & State		City & Stale			Election Campaign Financing Trust Fund Contribution	\$5.00 i Added k		
Zip	Country	28	Cour	ntry	This corporation owes the current year in			í
24	25	29	30		Personal Property Tax		X No ≠	
	9. Name and Address of Curre				10. Name and Address of New Registerer	Agent '		
CAD	TE BEATDIT M		Ì	81 Name				1
CAPOTE, BEATRIZ M 1101 BRICKELL AVENUE 17TH FLOOR MAMI FL 33131				82 Street Ad	dress (P.O. Box Number is Not Acceptable)	•		
				83				1
						85 Zip C	2040	
1				84 City	FI	L ``		
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statuti	es, the at	ove-named co	rporation submits this statement for the purpose of	of changing its	registered iistered	
office or re agent. I a	egistered agent, or both, in the State in familiar with, and accept the obligi	of Florida. Such change was a ptions of, Section 607:0505, Flo	rida Statu	ites.	rporation submits this statement for the purpose of tion's board of directors. I hereby accept the appoint 2//6/	19	,	
SIGNATURE	1 Ruhuns	Jacen			9/17	<u>'/</u>		_
	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE: ND DIRECTORS	Registered	Agent signature requ	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12_	98
TILE			1,1 TIT	LE		Change	Addition	Ξ
NAME	MI CHAM MM N	1 ASETSA	1.2 NA	ME .				- 4
STREET ADDRESS	MINING ST						1	
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CITY-ST-ZIP	4000 SW /22	ave 33186	1.4 01	Y-ST-ZIP		Channe	□ Addition	CR2E034 (11/98)
TITLE	STEXETTIREY	3 186 DELETE	1.4 CIT 2.1 TIT	TY-ST-ZIP		Change	Addition	CR2E03
TITLE NAME	STEKETORY NIGHTAL	ASCEN DELETE	1,4 CT 2,1 TIT 2,2 NA	ry-st-zdp ile me	-	Change	☐ Addition	CR2E03
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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 507. 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.