

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

FILED
Sep 13, 1999 8:00 am
Secretary of State

09-13-1999 90002 026 ***550.00

DOCUMENT # **P98000094768**

Corporation Name

GOODIE JAR FOODS, CO.



Principal Place of Business

1155 HILLSBORO MILE, STE 110
HILLSBORO BEACH FL 33062

Mailing Address

PO BOX 512
DEERFIELD BEACH FL 33443-0512

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/06/1998

Principal Place of Business

501 NE 16th AVE

Suite, Apt. #, etc.

Ft Lauderdale, FL

City & State

33301

Zip

33301

Country

25

Mailing Address

26 PO Box 30086

Suite, Apt. #, etc.

27

City & State

28 Ft Lauderdale, FL

Zip

29 33303

Country

30 USA

4. FEI Number

65-0874888

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

DEROY, VALERIE
1155 HILLSBORO MILE, STE 110
HILLSBORO BEACH FL 33062

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

501 NE 16th AVE

83

84 City

Ft Lauderdale

FL

85 Zip Code

33301

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.

NATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

1	<input type="checkbox"/> DELETE	D DEROY, LESLIE JAE 1155 HILLSBORO MILE, STE 110 HILLSBORO BEACH FL 33062
2	<input type="checkbox"/> DELETE	D DEROY, VALERIE J 1155 HILLSBORO MILE, STE 110 HILLSBORO BEACH FL 33062
3	<input type="checkbox"/> DELETE	
4	<input type="checkbox"/> DELETE	
5	<input type="checkbox"/> DELETE	
6	<input type="checkbox"/> DELETE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	501 NE 16 th AVE
1.4 CITY-ST-ZIP	Ft Lauderdale, FL 33301
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	501 NE 16 th AVE
2.4 CITY-ST-ZIP	Ft Lauderdale, FL 33301
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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: *Leslie J. Deroi* 09-07-99

Date

Daytime Phone #

CR2E034 (5/99)