

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 # P98000096430

1. Corporation Name

ENGLISH COUNTRY KITCHENS, INC.

Principal Place of Business

1240 E NEWPORT CENTRE DR
DEERFIELD BEACH FL 33442

Mailing Address

1240 E NEWPORT CENTRE DR
DEERFIELD BEACH FL 33442

FILED

99 SEP 15 PM 3:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



3/1/99 90035 0087950.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/12/1998

4. FEI Number

65-0879377

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

LAMBERT, SANDRA
370 W CAMINO GARDENS BLVD
SUITE 117
BOCA RATON FL 33432

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. 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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

12.1 NAME ☐ DELETE

PD
PETRUCCI, NICOLA
88 QUEENSWAY MAIDENHEAD
BERKSHIRE SL6 7SR ENGLAND

12.2 NAME ☐ DELETE

12.3 NAME ☐ DELETE

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12.27 NAME ☐ DELETE

12.28 NAME ☐ DELETE

12.29 NAME ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE ☐ Change ☐ Addition

13.2 NAME ☐ Change ☐ Addition

13.3 STREET ADDRESS ☐ Change ☐ Addition

13.4 CITY-ST-ZIP ☐ Change ☐ Addition

13.5 TITLE ☐ Change ☐ Addition

13.6 NAME ☐ Change ☐ Addition

13.7 STREET ADDRESS ☐ Change ☐ Addition

13.8 CITY-ST-ZIP ☐ Change ☐ Addition

13.9 TITLE ☐ Change ☐ Addition

13.10 NAME ☐ Change ☐ Addition

13.11 STREET ADDRESS ☐ Change ☐ Addition

13.12 CITY-ST-ZIP ☐ Change ☐ Addition

13.13 TITLE ☐ Change ☐ Addition

13.14 NAME ☐ Change ☐ Addition

13.15 STREET ADDRESS ☐ Change ☐ Addition

13.16 CITY-ST-ZIP ☐ Change ☐ Addition

13.17 TITLE ☐ Change ☐ Addition

13.18 NAME ☐ Change ☐ Addition

13.19 STREET ADDRESS ☐ Change ☐ Addition

13.20 CITY-ST-ZIP ☐ Change ☐ Addition

13.21 TITLE ☐ Change ☐ Addition

13.22 NAME ☐ Change ☐ Addition

13.23 STREET ADDRESS ☐ Change ☐ Addition

13.24 CITY-ST-ZIP ☐ Change ☐ Addition

13.25 TITLE ☐ Change ☐ Addition

13.26 NAME ☐ Change ☐ Addition

13.27 STREET ADDRESS ☐ Change ☐ Addition

13.28 CITY-ST-ZIP ☐ Change ☐ Addition

13.29 TITLE ☐ Change ☐ Addition

13.30 NAME ☐ Change ☐ Addition

13.31 STREET ADDRESS ☐ Change ☐ Addition

13.32 CITY-ST-ZIP ☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(954) 481 1917

007348

CR2E034 (5/99)