

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 13, 2004 8:00 am
Secretary of State

09-13-2004 90007 021 ***150.00

DOCUMENT # P98000100526 1. Entity Name SUGAR FREE LOW CARB DELITE, INC.					
Principal Place of Business 19180 W DIXIE HWY N MIAMI BEACH, FL 33180			Mailing Address 19180 W DIXIE HWY N MIAMI BEACH, FL 33180		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0886528	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CRIVARO, ARTHUR 19180 W DIXIE HWY N MIAMI BEACH, FL 33180				Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when releasing)</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST CRIVARO, ARTHUR 19180 W DIXIE HWY N MIAMI BEACH, FL 33180 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	19295 W. DIXIE HWY AD NORTH MIAMI BEACH, FLORIDA 33180 <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Arthur Crivaro</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <u>Sept 7, 04</u> Daytime Phone # <u>786 2818720</u>		

Attachment 24684981
P 98 0001 00526

Sugar Free
Low Carb Delite Inc.

**19295 W. Dixie Hwy. North Miami Beach,
Florida. 33180**

I was sent a letter of intent to dissolve my corporations, I have not been previously notified when it was due.

I had Moved from 19170/19180 W Dixie Hwy. In January, and had called Tallahassee about my move. I went to the Post Office turned in a change of address form... some of my mail I get, some I don't.

**My other business Sinners Edge 3045 North Federal Highway
Fort Lauderdale, Fl. 33306 This paperwork should also be
Mailed to 19295 W.Dixie Highway North Miami Beach Fl.33180**

This Letter as per our conversation

**Sincerely:
Arthur Crivaro**