## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

	1990	
DOCUN	ΛENT #	

S32475

(3)

Corporation Name

HUMBLE PIE, INC.

	of Business			Mailing Address									
9530 CORA ESTERO FI	ALEE AVENUE L. 33928			9530 CORAL ESTERO FL		JE							
								3.	Date Incorporated 02/18/199	or Qualified		e of Las 04/27	
<del></del>	ace of Business		2a	. Mailing Addr	ess			4. (	FEI Number	MA			Applied For
21	0		26						65-02200	182 			Not Applicable
Suite, Apt. #	#, etc.		27	Suite, Apt. #,	, etc.			5. (	Certificate of Statu	us Desired			75 Additional e Required
City & State	;		28	City & State				I	Election Campaign Trust Fund Contrib	-			.00 May Be ded to Fees
Zip 24	Cou <b>25</b>	ntry	29	Zip		Country 30	<i>i</i>	I .	This corporation h		r intangible ta		
	9. Name and Ad	dress of Curren		stered Agent	L				Name and Addre			Agent	<del></del>
						81	Nam			<del></del>	<del></del>		
	ence, daniel Coralee avenue	<u>:</u>				82	Stree	t Address (P.C	). Box Number is	Not Accepta	ble)		
	O FL 33928					83							
						84	City				FI	85	Zip Code
11. Pursuant t	o the provisions of Se	ections 607.0502	and 60	07.1508, Florida	a Statutes	, the above-	named	corporation su	bmits this stateme	ent for the pu	iroose of cha	•     anging it	s registered office
or registere	ed agent, or both, in h, and accept the ob	the State of Floric	da. Suci	h change was :	authorized	by the corp	oration	s board of dire	ectors. I hereby ac	cept the app	pointment as	registe	red agent. I am
3													
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SIGNATURE \		A 100	and the if	applicable	DAL		nt signatur	WREA required when rein			4/12/	94	
12.	Sunation speed or printed in	^ <i> /</i>	and the if	applicable CTORS	DA L	13.	nt signatur	required when rein	Stating) ADDITIONS/CHAN	IGES TO OF			
<b>12.</b>	unal Marked or printed in	OFFICERS AND	and the if	applicable	DA L	13. 1.1 THLE	nt signature	required when rein		IGES TO OF		96 DIREC Chang	
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14. To difference octiny that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

BUSHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/96 CAR 06/2