FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 28 1997 8:00am

Secretary of State

Daytime Phone #

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S81803

(6)

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13625 TAMIANI TR NORTH PORT FL 34287 NORTH PORT FL 34287 2018 Substitution of Charles of Charles Substitution of C	ABBE'S DONUT SHOP II, INC. Principal Place of Business	Mailing Address			
Principal Place of Euclinists 2a, Mailing Address 4. FE Number Applies Appli	3625 TAMIAMI TR	13625 TAMIAMI TR			
Suite, Apt. #, etc. Country Added to Fi Funds Statutes by Benchmark to Helperthelion and Address of Current Registered Agent DUNCAN, VALERIE 1362S TAMAMI TR NORTH PORT FL 34287 B2 Street Address (F.O. Box Number is Not Acceptable) DUNCAN, etc. B2 Street Address (F.O. Box Number is Not Acceptable) B3 Name B4 City FL B5 Zip Cod City Suite is not acceptable of the appointment as registered agent. Or 6500, Floridas Statutes, the above-hamed corporation's board of directors. I hereby accept the appointment as registered agent. Or 6500, Floridas Statutes, the above-hamed corporation's board of directors. I hereby accept the appointment as registered agent. Or 6500, Floridas Statutes, the above-hamed corporation's board of directors. I hereby accept the appointment as registered agent. Or 6500, Floridas Statutes, the above-hamed corporation's board of directors. I hereby accept the appointment as registered agent. Or 6500, Floridas Statutes, the above-hamed corporation's board of directors. I hereby accept the appointment as registered agent. Or 6500, Floridas Statutes, the above-hamed corporation's board of directors. I hereby accept the appointment as registered agent. Or 6500, Floridas Statutes, the above-hamed corporation's board of directors. I hereby accept the appointment as registered agent. Or flor				1	3a. Date of Last Report 02/26/1996
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Zep 25 30 September 25 30 Sept	City & State	City & State		, -	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent DUNCAN, VALERIE 13625 TAMIAMI TR NORTH PORT FL 34287 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Cod 11. Pursuant to the provisions of Spetions 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its re office or registered agent, or foll, in the Change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and first applicable. SIGNATURE PST UNCAN, VALARIE OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN IN ILL DUNCAN, VALARIE 12. OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN ILL DUNCAN, VALARIE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN ILL PST UNCAN, VALARIE 13. STREET ADDRESS CITY ST-ZIP NORTH PORT FL ADDRESS ON STREET ADDRESS CITY ST-ZIP NORTH PORT FL DELETE 23. TIBLE DELETE 24. TIBLE Change ASSIRET ADDRESS CITY ST-ZIP DELETE AND ADDRESS SA CITY-ST-ZIP ADDRESS SA CITY-ST-ZIP ADDRESS CITY ST-ZIP ADDRESS SA CITY-ST-ZIP ADDRESS SA CITY-ST-ZIP ADDRESS CITY ST-ZIP ADDRESS CITY ST-ZIP ADDRESS SA CITY-ST-ZIP ADDRESS CITY ST-ZIP			Country	····	
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DUNCAN, VALENIE 13625 TAMIAMI TR NORTH PORT FL 34287 B2 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Cod 11. Pursuant to the provisions of Spetions 007,0502 and 807,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its re office or registered agent, synding, in the Clinic Provisions of Spetions Octoor 607,4506, Florida Statutes SIGNATURE Signature the first private upon of registered agent and first Pappication of, Socion 607,4506, Florida Statutes NOTE Registered by the corporation's board of directors. I hereby accept the appointment as registered agent agent and first Pappication of, Socion 607,4506, Florida Statutes SIGNATURE Signature the first private upon of registered agent and first Pappication of, Socion 607,4506, Florida Statutes NOTE Registered Agent agenture required when reinstancy DATE 12. OKFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN MAKE SIGNATURE DUNCAN, VALARIE 12 NAME SIFIET ARDRESS 6740 S. BISCAYNE 13 SIRRET ADDRESS CITY ST-7P NORTH PORT FL DELETE 11 TITLE 12 NAME 13 SIRRET ADDRESS CITY ST-7P NORTH PORT FL DELETE 13 TITLE 14 CITY-ST-2P DELETE 23 SIRRET ADDRESS CITY-ST-7P NORTH PORT FL DELETE 33 SIRRET ADDRESS CITY-ST-7P NORTH PORT FL DELETE 41 TITLE 14 CITY-ST-2P Change Change Change CITY-ST-7P NORTH PORT FL Change Change CITY-ST-7P NORTH PORT FL Change Change CITY-ST-7P NORTH PORT FL Change CHANGE 34 CITY-ST-7P NORTH PORT FL Change CHAN		rrent Registered Agent	01 11	10. Name and Address of New Re	glatered Agent
NORTH PORT FL 34287 83 City FL 85 Zip Cod 11. Pursuant to the provisions of Spetions 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its re- office or registered agent, or foilit, in the SDR of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and for the purpose of changing its re- office or registered agent, or foilit, in the SDR of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and the Papalcate Signal URE Signal URE PST DUNCAN, VALARIE DUNCAN, VALARIE SIRET ADBESS CIT- ST- 7P NORTH PORT FL DUNCAN, ART			Name		
B3 Ref Applies B4 City	•		82 Street Add	ress (P.O. Box Number is Not Acceptab	ole)
11. Pursuant to the provisions of Spetions 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its re- office or registered agent, cyricity, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent agent, cyricity, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent agent agent by the corporation's board of directors. I hereby accept the appointment as registered agent agent agent by the corporation's board of directors. I hereby accept the appointment as registered agent	NORTH PORT FL 34287		83		
11. Pursuant to the provisions of Spetions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its resolution 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 a					
11. Pursuant to the provisions of Spetions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its red office or registered agent, or folli, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or folli, in the State of Florida Statutes. SIGNATURE Signature type or open or registered agent and first applicable. NOTE. Registered Agent algenture required when reinplating) DATE 12.			84 City	ı	FL 85 Zip Code
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14. I do 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. I am an officer or director of the corporation or the receiver or fursite empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it changed, or on an all inchment with an address.	information indicator on this annual ropo	il or supplemental annual report is true a	nd accurate and tha	at my signature shall have the same legs	at affect as if made under nath: that