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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996	DI DI	IVISION OF CORPOR	ATIONS		
DOCUMENT # \$996	682	(4)			
KISS FAST FOODS, INC.					
) (184 0) 3 10 (1840 3 10) 3 11 (1840 1840 1840 3 140) 3 140 (1840 3140) 3140 (1840 3140) 3140 (1840 3140) 3140 (1840 3140) 3140 (1840 3140) 3140 (1840 3140) 3140 (1840 3140) 3140 (1840 3140) 3140 (1840 3140) 3140 (1840 3140) 3140 (1840 3140) 3140 (1840 3140) 3140 (1840 3140) 3140 (1840 3140) 3140 (1840 3140) 3140 (1840 3140) 3140 (1840 3140) 3140 (1840 3140) 3140 (1840 3140) 3140 (1840 3140)	1118-1187 BJB31 BJB11 BJB11 BJB11 BJB11 BJB31 BJB11 BJB1
Principal Place of Business	Mailing Addre	ess			
4748 IRLO BRONSON HWY. 4748 IRLO BRONSON H					
KISSIMMEE FL 34744		E-FL-34744			
				3. Date Incorporated or Qualified 12/12/1991	3a. Date of Last Report 01/31/1995
2. Principal Place of Business	2a. Mailing A		_	4. FEI Number	Applied For
Suite, Apt. #, etc.		26 1304 North Bay Street Suite, Apt. #, etc.		59-3098764	Not Applicable
22 Strie, Apr. #, erc.	27 Suite, Api	i. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	· · · · · · ·	Crty & State		6. Flection Campaign Financing	\$5.00 May Be
23		simmee, FL		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Cou	ntry	8. This corporation has liability for	
24 25 9. Name and Address of Cur	29 3474			Florida Statutes Y Yes 10. Name and Address of New F	No Registered Agent
			81 Name	to. Name Bit Address of New I	registered Agent
GEORGE L. HAYES III P.A. SERVICE	ES INC.		82 Street	Address (P.O. Box Number is Not Acceptate	NIES
696 1ST AVENUE NORTH			52 Street /	Address (m.o. nox number is not Acceptat	olej
SUITE 303			63		
ST. PETERSBURG FL 33701			84 City		85 Zip Code
					FL T
 Pursuant to the provisions of Sections 607.05 or registered agent, or both, in the State of F 	lorida. Such change w	vas authorized by the d	ve-named co :orporation/s	rporation submits this statement for the pu board of directors. Thereby accept the app	rpose of changing its registered office pointment as registered agent. Lam
familiar with, and accept the obligations of, S	ection 607.0505, Flori	ida Statutes.			
SIGNATURE	gent and toe if applicable	(NOTE: Rigistared	Agent signature re	a pikad whomina hata ngi	CATE
12. OFFICERS	AND DIRECTORS	13.			ICERS AND DIRECTORS IN 12
THLE P		DELETE 1.1 T	TLE		★ Change ☐ Addition
NAME YOUNESS, DANIEL W.		1.2 N	i	YOUNESS, DANIEL W.	
STREET ADDRESS 11963 INDIAN ROCKS RI CITY-ST-ZIP LARGO FL	J.		REET ADDRESS	13000 PARK BLVD.	
CITY-ST-ZIP LANGU FL TIBLE S		1.4 CI DELETE 2 1 T	TY - S1 - 7IP	SEMINOLE, FL 34646	Change Addition
NAME YOUNESS, ANGELINE	<u>.</u> .	221		VALINECE ANCELTHE	XX Change Nouvell
STREET ADDRESS 11963 INDIAN ROCKS RU)		REFT ADDRESS	YOUNESS, ANGELINE 13000 PARK BLVD.	
CHY-ST-ZIP LARGO FL			TY - ST - ZIP	SEMINOLE, FL 34646	
TITLE		DELETE 3 1 I		1111111111111111111111111111111111	Change Addition
NAME		3.2 N/	ime		
STREET ADDRESS			TREFT ADDRESS		
CITY - ST - ZIP	····		IY-SI-ZIP		
TITLE	ال	DELETE 4, 17	1		Change Addition
NAME STREET ADDRESS		4.2 N	REET ADDRESS		
CITY-ST-ZIP			REET AUURESS TY-ST-ZIP		
TITLE		DELETE 5 1 T			Change Addition
NAME	_ .	5.2 N			
STREEL ADDRESS		5.3 \$1	REET ADDRESS		
City-St-ZiP			TY-ST-ZIP		
TITLE	<u> </u>	DELFTE 6 1 TI	TLE	• • • • • • • • • • • • • • • • • • • •	Change Addition
NAME		6 2 N			
COURT DESIGNATION OF THE PROPERTY OF THE PROPE					
STREET ADDRESS CITY-ST-ZIP			REET ADDRESS TY-ST-ZIP		

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 frustee 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 or in an address.

SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

/3/20/96 (m)