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Mar 18 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # V28600

(7)

1. Corporation Name
IRIE PASTRIES INC.

Principal Place of Business
3696 W. OAKLAND PARK BLVD
LAUDERDALE LAKES FL 33311
US

Mailing Address
3696 W. OAKLAND PARK BLVD
LAUDERDALE LAKES FL 33311-1117
US



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

BARKER, SONIA J.
8510 NW 21ST STREET
CORAL SPRINGS FL 33071

3. Date Incorporated or Qualified
04/10/1992

3a. Date of Last Report
04/05/1996

4. FEI Number
65-0324450

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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

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 the Registered Agent

(F401) Registered Agent signature required when resigning

DATE

12. OFFICERS AND DIRECTORS

TITLE

P

NAME

BAUGH, AUDREY A.
3779 NW 26TH STREET
LAUDERDALE LAKES FL

CITY-ST-ZIP

TITLE

D

NAME

BARKER, SONIA J.
8510 NW 21 ST
CORAL SPRINGS FL 33071

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

P

1.2 NAME

Baugh Audley

1.3 STREET ADDRESS

3779 NW 26th street

1.4 CITY-ST-ZIP

LAUDERDALE LAKES FL; 33311

2.1 TITLE

D

2.2 NAME

BARKER Sonia

2.3 STREET ADDRESS

8510 NW 21st street

2.4 CITY-ST-ZIP

Coral Springs; FL; 33071

3.1 TITLE

D

3.2 NAME

Baugh Judy

3.3 STREET ADDRESS

3779 NW 26th street

3.4 CITY-ST-ZIP

LAUDERDALE LAKES; FL; 33311

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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:

Audley Baugh

Phat. [Signature] 2/10/97

CR2E034 (9/96)