FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

DOCUMENT # V44408 (5)

1. Corporation Name

INTIMATE BAGELS, INC.

Principal Place of Business: 7134 NOB HILL ROAD, TAMARAC FL 33321

Mailing Address: 7134 NOB HILL ROAD, TAMARAC FL 33321

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/15/1992

3a. Date of Last Report: 03/14/1994

4. FEI Number: 59-3130580 ☐ 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

2. Principal Place of Business — 21, 22, 23, 24, 25

2a. Mailing Address — 26, 27 Suite, Apt. # etc., 28 City & State, 29 Zip, 30 Country

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

KAPLAN, ANITA
7134 NOB HILL ROAD
TAMARAC FL 33321

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. [illegible] Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office [illegible] Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. [illegible] Florida Statutes.

SIGNATURE ____ DATE ____

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: D NAME: KAPLAN, ANITA STREET ADDRESS: 5151 CASA REAL DR. CITY-ST-ZIP: DELRAY BEACH FL	☑ Change ☐ Addition STREET ADDRESS: 7134 Nob Hill RD Tamarac Fla
	☐ Change ☐ Addition
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14. I hereby certify that the information supplied with this filing is voluntarily furnished and 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: Anita Kaplan — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/95 — Date

305 722-9520 — Daytime Phone #

0220072 CP