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

1996

DOCUMENT #

V48595

(5)

MARY'S RETAIL DONUTS, INC.

MARYS	HETAIL DUNUTS, INC.						
Principal Place o	f Business	Mailing Address			Lidtet drifte Ailde eftite deten fonen	Ait. Aidil Aiqil Aibil 4;0;;	e.d.: 8:8:1 165;
6455 BONNIE BAY CIRCLE NORTH 6455 BONNIE BA PINELLAS PARK FL 34665 PINELLAS PARK				н			
					3. Date Incorporated or Qualified 07/02/1992	3a. Date of Last R 02/17/19	
2. Principal Plac		2a. Mailing Address			4, FEI Number 59-3136573		Applied For Not Applicable
1 13015 Suite, Apt. #.		Suite, Apt. #, etc.			Certificate of Status Desired	\$8.75	Additional Required
2] State		City & State			6. Election Campaign Financing	\$5.0	May Be
al Sami	role Fl	28			Trust Fund Contribution		d to Fees
Zign Country		Zip Country 30		This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No			
4 <u> </u>	9. Name and Address of Current		_[30]		10. Name and Address of New R	egistered Agent	
				81 Name			
HAYDON, KELLY J.				82 Street Add	Address (P.O. Box Number is Not Acceptable)		
	NNIE BAY CIRCLE NORTH S PARK FL 34665		83				
, with				84 City		FL 85 Z	ıp Code
	200	LCOZ JEDO Civido Ciato	too the abo	up pamed corec	pration submits this statement for the pure	rooca of changing its	registered office
or registere familia: with SIGNATURE	id agent, or both, in the State of Florid i, and accept the obligations of, Section Characteristics pented pented by state agents	a Such change was author, on 607.0505, Florida Statute	s.	Corporation's boa	and when renstating)	35-96	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF		
THO	D	☐ DELETE	1.11	HTLE		Change	Addition
NGMI	HAYDON, KELLY J. 6732 DEER POND LANE		1.2 h				
STREET ADDRESS	PINELLAS PARK FL			TREET ADDRESS			
OTY-ST-ZIP TIFLE	D	☐ DELFTE		TITLE		☐ Change	☐ Addition
NAME	CHERRY, MARY E.			IAME			
STEEL ADDRESS	6732 DEER POND LANE PINELLAS PARK FL			STREET ADORESS			
CHY-SE ZIF	PINELLAS PARIN FL	DELETE		TITLE		Change	Addition
NAME		 -	321	IAME			
STHELL ADDRESS				STREET ADDRESS			
CITY-ST-ZIF		[] DELETE		CITY - ST - ZIP THTLE		Change	Addition
TOTAE NAME		CJarren	1	vame			
STREET ABORESS			4.3	STREET ADDRESS			
CHY ST 70P				CITY-ST-ZIP		Change	Addition
TillE		DEFEIF		TITLE			
NAME STREET ADDRESS			- 1	NAME STREET ADDRESS			
City - ST - Zif-				CITY - SI - ZIP			
Tilly		DELETE		TITLE		☐ Change	Addition
NAM:			6.2	NAME			
STREET ADDRESS				STREET ADDRESS			
C(1) - S1 - Z(0)		with this files is unfuntable for	roichad an	CITY-ST-ZIP	y for the exemption stated in Section 111	9.07(3)(k), Florida Stat	utes. I further
certify that		ial report or supplemental at ration or the receiver or trus	nnuai repori dee empow		rate and that my signature shall have th this report as required by Chapter 607, I		

SIGNATURE: