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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V56238

(1)

APPLE TREE CAFE, INC.

Principal Place of Business

	1	

Mailing Address		

## FILED Apr 29 1997 8:00am Secretary of State



P.O. BOX 7178 Wesley Chap US	EL FL 33543	WESLEY CHAPE	L FL 33543-7179						
						3. Date Incorporated or Qualified 08/10/1992	3a. Date of La 05/01/199		7
2. Principal Pi	ace of Business	2a. Mailing Add	lress			4. FEI Number	·	Applied For	1
21		26				59-3135943	7	Not Applicable	, ]
Suite, Apt.	#, etc.	Suite, Apt. #	l, etc.			5. Certificate of Status Desired	\$8.7	75 Additional	7
22		27				6. Certificate of Status Desired	Fe	e Required	
City & State	9	City & State				6. Election Campaign Financing	\$5.	00 May Be	7
23		28				Trust Fund Contribution	☐ Adı	ded to Fees	
Zip	Country	Zip		ountry		8. This corporation has liability for i		er s. 199.032,	
24	25	29 30 Florida Statutes ☐ Yes ☐ No				╛			
	9, Name and Address of Cu	rrent Registered Agent				10. Name and Address of New Re	gistered Agent		4
	BER, JACOB I.			81	Name				
	29 HIGHWAY 54 WEST			82 Street		Address (P.O. Box Number is Not Acceptable)			1
WES	SLEY CHAPEL FL 33544								_
				83					1
				84	City		85	Zip Code	-[
-							FL ["		
11. Pursuant office or r agent. I a	to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o	.0502 and 607.1508, Flor State of Florida. Such cha ibligations of, Section 607	ida Statutes, the nge was authoriz 2.0505, Florida St	above zed by tatules	e-named or the corpor s.	orporation submits this statement for the p ration's board of directors. I horeby accep	urpose of changi of the appointmen	ng its registered it as registered	
SIGNATURE	Signature, typed or printed name of registers	id agent and tine if applicable	(NO1E Registe	ed And	ni s consture rec	quired when reinstating)	DATE		
12.		AND DIRECTORS	13		- ground I	ADDITIONS/CHANGES TO OFFIC		TORS IN 12	٦́و
TITLE	ΡĎ		DELETE 1,1	TITLE			Cha	nge 🔲 Addition	18
NAME	DOH, YOUNG M		1.2	NAME	Ì				15
STREET ADDRESS	P.O. BOX 7179 NA		1.3	STREET	ADDRESS				18
CITY-ST-ZIP	WESLEY CHAPEL FL			CITY-S					
TITLE				TITLE			Cha	nge Addition	Շ
NAME			2.2	NAME					İ
STREET ADDRESS			2.3	SIREET	ADDRESS				1
CITY-ST-ZIP				4 CITY-S		•			
TITLE				TITLE			Cha	nge Addition	1
NAME			32	NAME					
STREET ADDRESS			33	STREET	ADDRESS				
CITY-ST-ZIP			3.4	i. City- 5	ST-ZIP				1
TITLE				TITLE	-		Cha	nge Addition	1
NAME			4.3	2 NAMÉ	- 1				
STREET ADDRESS			4.3	STREET	ADDRESS				
CITY-ST-ZIP				CITY-S					1
TITLE				TITLE			☐ Cha	nge 🔲 Addition	1
NAME			5.2	NAME					
STREET ADDRESS			5.3	STREET	ADDRESS				
CITY-ST-ZIP			1	CITY-S					
TITLE				TITLE			Cha	nge 🔲 Addition	1
NAME	,		6.2	NAME					1
STREET ADDRESS			6.3	STREET	ADDRESS				
CITY-ST-ZIP			6.4	CITY-S	T- 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 if 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 tappears in Block 12 or Block 13 if changed, or on an attachment with an address.

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