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

May 13 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # V60678 **SWEETBRIE**R CAFE, INC. Principal Place of Business Mailing Address 2571 EAST OCEAN BLVD. BTUART FL 34996 2571 EAST OCEAN BLVD. STUART FL 34996 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/28/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 2571 E. Octan Blud 65-0352684 Same Not Applicable Sulte, Apt. #, etc Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Strant F1. 34996 Fee Required NA City & State City & State \$5.00 May Be 6. Election Campaign Financing 34956 7499 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 25 Markn 3499 24 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent WUJNOVICH, MICHELLE L 81 Name 3004 SE RIVER TER 82 Street Address (P.O. Box Number is Not Acceptable) STUART FL 34996 63 City Zip Code 85 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 lamiliar with, and accept the obligations of, Section 607,0505, Florida Statutes. (NOTE: Registered Agent signature required when reinstating) (10/97)12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE 1.1 TITLE Change Addition WUJNOVICH, MICHELLE L CR2E034 3004 SE RIVER TER STREET ADDRESS Prisident 1.3 STREET ADDRESS STUART FL 34996 1.4 CITY-\$1-ZIP CITY-ST-ZIP 21 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 1000 NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME

6 3 STREET ADDRESS

6.4 City - ST- ZIP

14. Thereby 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 suppliemental 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 this 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. Michell d. Warner & SIGNATURE:

NAME STREET ADDRESS

CITY-ST-ZIP

4/23/98 51-286 1988

**FILED**