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 # H89428

(7)

STEREOTYPES, INC.

						- 1 (8) 1 (8) 1 (8) 1 (8) 1 (8) 1 (8) 1 (8) 1 (8) 1	Pin ii 10011 01511		#JIKH EBEI	
Principal Place of Business Mailing Address						- 19414 11401 8140 18114 81814 1941 1811	Athli Athli Athli	Aten Biffil	71611 19P1	
C/O CARLOS I 550 N. NOVA F DAYTONA BEA		550 N. NOVA	C/O CARLOS M. GONZALEZ 550 N. NOVA RD. DAYTONA BEACH FL 32114-1702							
						3. Date Incorporated or Qualified 12/11/1985 3a. Date of Last Report 03/07/1996			eport	
2. Panc pal P	lace of Business	2a. Mailing A	ddress			4. FEI Number			plied For	
21		26				59-2669592 Not Applicable				
Suite, Apt 22		27	<u> </u>			5. Certificate of Status Desired Fee Required				
City & State	e e	} <u>-</u>	City & State			B. Election Campaign Financing \$5.00 May Be				
23	Commen	28				Trust Fund Contribution	<u>LJ</u>	Added t		
Zip	Country Zip			intry		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
24	25 29 30 9. Name and Address of Current Registered Agent			ī —		10. Name and Address of New Registered Agent				
CON	NZALEZ, CARLOS M.	outton ingrandra rigo		81	Name	10.	g			
	MUIRFIELD DRIVE			82						
	TONA BEACH FL 32114				Street Addre	iress (P.O. Box Number is Not Acceptable)				
				83						
				84	City		FL	'	Code	
11. Puzsuant office or r agent. La SIGNATURE	to the provisions of Sections 6 egistered agent, or both, in the m familiar with, and accept the Significations is principled accept.					oration submits this statement for the pon's board of directors. I hereby acce	purpose of ch of the appoin	anging it tment as	s registered registered	
12.		RS AND DIRECTORS	(NOTE Registere	o Age	nt signature requir	ADDITIONS/CHANGES TO OFFIC		RECTOR	2S IN 12	
112. 1111.t	PD		DELETE 1.1 TI	TLF		ADDITIONA OF TAXABLE TO OF THE		Change	Addition	
NAME	GONZALEZ, CARLOS M.	-	1.2 N					,		
STREET ADDRESS	127 MUIRFIELD DRIVE		i i		ADDRESS					
C TY - ST - ZiP	DAYTONA BEACH FL		1,4 CI							
TITLE	VD		DELETE 2.1 TI		1 20	☐ Change ☐ Addition			Addition	
NAME	GONZALEZ,CARLOS N.		2.2 N		Ì					
STREET ADDRESS	127 MUIRFIELD DRIVE				ADDRESS					
CITY ST-ZIP	DAYTONA BEACH FL				ST-ZIP					
TITLE	STD		DELETE 3.1 TI					Change	Addition	
NAME	GONZALEZ, CLARA E.		3.2 N	AME						
STREET ADDRESS	127 MUIRFIELD DRIVE		3.3 \$	TREET	ADDRESS					
City - St - ZiP	DAYTONA BEACH FL		34.0	UTY-S	ST-ZIP					
TITLE			DELETE 4.1 TI	ITLE				Change	Addition	
NAMI,	i		4.21	IAME	İ					
STREET ADDRESS	İ		438	TREET	ADDRESS					
CHY-ST-ZIP	<u> </u>		440	iTY · S	ST-ZIP			<u></u>		
Till(F	DELETE 51		ITLE		Change Addition					
NAME	· ·		52 N	AME						
S/REF1 ADDRESS			538	TREET	ADDRESS					
CITY - ST - ZIPI		_		11Y-S	ST-ZIP					
Till(F			DELETE 61T	ITLE				Change	Addition	
NAME			62 N	IAME	Ì					
CTOTAL ASSISTED			625	TOECT	ADDRESS					

SIGNATURE

E OF SIGNING OFFICER OF

CARLOS M. GONZA

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 Brock 12 or Block 13 if changed, or on an attachment with an address.

1-22-97

FILED

Jan 28 1997 8:00am

Secretary of State

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