

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P94000025309 (3)**

1. Corporation Name  
**ANYTHING IN FENCE, INC.**



Principal Place of Business  
**4640 LOTUS WAY  
BOYNTON BEACH FL 33436**

Mailing Address  
**4640 LOTUS WAY  
BOYNTON BEACH FL 33436**

3. Date Incorporated or Qualified **03/29/1994** 3a. Date of Last Report **08/09/1995**

2. Principal Place of Business **Boca Raton** 2a. Mailing Address **3920 NW Boca Raton Blvd**

4. FEI Number **65-0480354** Applied For Not Applicable

21. Suite, Apt. #, etc. **#18** 27. Suite, Apt. #, etc. **#18**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

23. City & State **Boca Raton FL** 28. City & State **Boca Raton FL**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

24. Zip **33431** 25. Country **USA** 29. Zip **33431** 30. Country **USA**

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

9. Name and Address of Current Registered Agent  
**CRISAFULLI, DAVID  
4640 LOTUS WAY  
BOYNTON BEACH FL 33436**

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. 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 familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *David Crisafulli* **PRESIDENT** Date **6/2/96**

12. OFFICERS AND DIRECTORS

TITLE	<b>P</b>	<input type="checkbox"/> DELETE
NAME	<b>CRISAFULL, DAVID</b>	
STREET ADDRESS	<b>4690 LOTUS WAY</b>	
CITY-ST-ZIP	<b>BOYNTON BCH., FL 33436</b>	
TITLE	<b>VP</b>	<input type="checkbox"/> DELETE
NAME	<b>CRISAFULL, STEPHANIE</b>	
STREET ADDRESS	<b>4690 LOTUS WAY</b>	
CITY-ST-ZIP	<b>BOYNTON BCH., FL 33436</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	<b>3920 NW Boca Raton Blvd #18</b>
1.4 CITY-ST-ZIP	<b>Boca Raton FL 33431</b>
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	<b>3920 NW Boca Raton Blvd #18</b>
2.4 CITY-ST-ZIP	<b>Boca Raton FL 33431</b>
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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)(k), 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: *David Crisafulli* Date **6/2/96** Daytime Phone # **407 392 0048**

CR2E034 (12/95)