## 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
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	1990				
DOCUN 1. Corporation	MENT # <b>P9500</b> (	0015352 (4)			
	ENTERPRISES, INC.				
Principal Place	of Business	Mailing Address			
171 S.W. 32ND AVENUE		171 S.W. 32ND AVENUE			
DEERFIELD BE	ACH FL 33442	DEERFIELD BEACH FL 33	442		20 Date of Lord Doored
				3. Date Incorporated or Qualifier 02/23/1995	d 3a. Date of Last Report
2. Principal Place of Business		2a. Mailing Address	<del></del>	4. FEI Number	Applied For
21 4940 REAGEN WAY		26 P.O. BOX 104	57	65-0558164	Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	
	SOTA, FLORIDA	28 SARASOTA, F	LORIDA	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country		or intangible tax under s. 199.032,
24 342	232 <sup>25</sup> U.S.	29 34278	30 U.S.	Florida Statutes 10. Name and Address of Nev	/es No
	9. Name and Address of Curre	nt Hegistered Agent	81 Name	To. Name and Address of Nev	r negistered Agent
				D. R. WOMELDORPH Idress (P.O. Box Number is Not Accep	As follows
man and a second				OAK RUN LANE	table)
	32ND AVE.		83	OAK KON LANE	
DEEKFIE	LD BEACH FL 33442				85 Z <sub>IP</sub> Code
			84 City SARAS	SOTA	FL   34243
	o the provisions of Sections 607.050 ed agent, of both, in the State of Flor h, and arcept the obligations of, Sec	2 and 607.1508, Florida Statutes ida. Such change was authorized tion 607.0505, Florida Statutes.	, the above-named corp I by the corporation's b	poration submits this statement for the oard of directors. Thereby accept the a	purpose of changing its registered office ppointment as registered agent. I am 3–20–96
SIGNATURE _	Signature, typed or printed name of pristered ager	nt and title if applicable (NCH)	Registered Agent signature re-		DATE
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO C	OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1 1 TITLE		Change () Addition
NAME	CALZAVARA, DANTE		1.2 NAME		
STREET ADDRESS	171 S.W. 32ND AVE.	_	1.3 STREET ADDRESS		
CITY-S1-ZIP	DEERFIELD BEACH FL 3344	2 DELETE	1 4 CITY - ST - ZIP 2 1 TIJLE		Change Addition
TITLE	D CHANGE COLUMN	X) better	2 2 NAME		
NAME PAOPLE APPONENCE	SIMONTON, SCOTT		2 3 STREET ADDRESS		
STREET ADORESS	171 S.W. 32ND AVE. DEERFIELD BEACH FL 3344	9	2 4 DITY - S1 - 71P		
CITY ST-ZIP	DECHIELD DENVILLE 9399	DELFTE	3 1 T-TLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			33 STREET ADDRESS		
CITY-ST-ZIP			3.4 CHY-ST-ZIP		
TITLE		☐ DELETE	4. 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		F) britis	4.4 C(TY - ST - 2(P)		Change Addition
THLE	•	DETEIE	5. 1 TILLE		
NAME			5.2 NAME 5.3 STREET ADDRESS		
STREET ADDRESS			5.4 City-ST-7iP		
CHY-SI-ZIP TITLE		DELETE	6 1 1 I I L F		Change Addition
NAME			62 NAME		
TECNIC			D O CTULET ADDDECC		

14. I do hereby certify that the information supplied with this filling 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 eath; 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 13 inchanged, or on an attachment with an address.

SIGNATURE:

DANTE CALZAVARA

3-20-96

941-351-0711

CR2E034 (12/95)