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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandre B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000056023 (9)

MENNA	Brothers Number Two), INC.		
Principal Plac	e of Business	Mailing Address		I TOURNOOM HID TOTTLI ADDIT BOTTL BOLL BOTTL OBJECT BOTTO OTHER DOTTL TROOP
5316 US HWY. 19 5316 US HWY. 19				
NEW PORT RICHEY FL 34652 NEW PORT RICHEY FL 346			52	
				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				06/25/1997
	lace of Business	2a. Mailing Address		4. FEI Number Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-3759269 Not Applicable
22		27		5. Certificate of Status Desired Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zıp	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25		10	Personal Property Tax due June 30. Yes No
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered Agent
PRATESI, EMIL G Mario Menna Mario Menna				
1253 PARK ST.				ress (P.O. Box Number is Not Acceptable)
CLEARWATER FL 33758			5316	U-S-19 North
			83	
			84 City	D. A. Di Lau E3 24CEO E1 85 Zip Code O
New Port				Port Kichev, Fl. 34652 FL 34652
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 effect or registered effects of the purpose of the purpose of changing its registered.				
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. Mario Menna President				
SIGNATURE	Mario M	ויומזיוט	menna Presid	enc (0.5 - 1 / 5 - 7 0
	Signature, typed or printed name of registered ago OFFICERS AN		Registered Agent signature requir	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS AN	DELETE	13.	CE PRESIDENT Change Addition
NAME				SOHN MENNA
STREET ADDRESS				-01, U.C. 10 N.
CITY-ST-ZIP			1.4 City-ST-ZIP N	EW PORT RICHEY, FL 34652 ECRETARY Change HAddition
TITLE		DELETE	2.1 TITLE S	ECRETARY Change Addition
NAME				
STREET ADDRESS			23 STREET ADDRESS S	0 HN MENNA 1316 U.S. 19 N.
CITY-ST-ZIP			2.4 CITY-ST-ZIP	EW PORT RICHEY, FL 34652
TITLE		DELETE	3.1 TITLE	REASURER Change Addition
NAME			128885 (2	OUTO MENNA
STREET ADDRESS			3.3 STREET ADDRESS 2	8596 U.S. 19 N.
CITY-ST-ZIP			3.4. CITY-ST-ZIP	LEARNATER, FL 33761
TITLE		DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	•
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP	<u> </u>		5.4 CITY-ST-ZIP	
THILE		DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	,
STREET ADDRESS			6.3 STREET ADDRESS	
Pity Ct. 7ID	}		6 & CITY - CT - TID	1

14. 1 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 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 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.

Mario Menna

813-772-5801

FILED

Mar 23 1998 8:00am

Secretary of State