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



PROFIT	(P. 18 12 2)	FLORIDA DEPARTMENT OF STATE.				
CORPORATION		Sandra B. Mortham Secretary of State				
ANNUAL REPORT						
1996		DIVISION OF CORPORATIONS				
DOCUMENT #  1. Corporation Name	399334	(2)				
AMERICANO PANC	ake inn & Motels	, INC				
Principal Place of Business	Mating Address					
626 JOHN SIMS PARKWAY NICEVILLE FL 32578 US		626 JOHN SIMS PARKWAY NICEVILLE FL 32578				
<del></del>						
2. Principal Place of Business	2a.	Mailing Address				
Principal Place of Business     The Pla	2a. 26	Mailing Address				



3. Date Incorporated or Qualified

04/14/1972

3a. Date of Last Report

04/11/1995

2. Principal Plac	e of Business		2a. Mailing Address			4. FEI Number 59-1470680	_L		Applied For Not Applicable
1			c.			5. Certificate of Status Desired		\$8.75	Additional Required
						Election Campaign Financing     Trust Fund Contribution			May Be to Fees
Zip	Country	Zip	Cou	intry		8. This corporation has liability for	intangible t	ax under s	199.032,
n	25	29	30				s 🗌 No		
<u>'L</u>	ent Registered Agent		Ţ		10. Name and Address of New Registered Agent				
			. , , , , , , , , , , , , , , , , , , ,	81	Name				
TISA, LEO P 626 JOHN C. SIMS PARKWAY				82 Street Address (P.O. Box Number is Not Acceptable)					
				Street Address (F.O. Blox Mainteen is their recognitions)					
	E FL 32578			83					
MICEVILL	E FL 32376			L				ne   7.	p Code
				84	City		FL	_   <b>85</b>   Z <sub>1</sub>	p Code
familiar with SIGNATURE <b>८</b>	and accept the obligations of, Ser	CRO CRO Stalathur Spicare	Taille boy to o	ندر ۸ ر	rijusta a piri	ouvre on state j	5/28/	174	
12.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES 10 OF	ICERS AN	DIRECTO	
TITLE	P	☐ DELE	TE 111	TITLE				Change	Addition
vAME	TISA, STEVEN		12 N	AM <del>E</del>					
STREET ADDRESS	626 JOHN C. SIMS PKWY.		138	REF	ADDRESS				
DITY-ST-ZIP	NICEVILLE, FL 00000		140	) 1+-S	J - Z.P				
TITLE	ST	DELE DELE	TE 2.11	TITLE				Change	Addition
NAME	TISA, MICHAEL		22 N	AVINE					
STREET ADDRESS	626 JOHN SIMS PKWY.		235	STREET	ADDRESS				
CITY-ST-ZIP	NICEVILLE FL			DITY - S	31 ZIF				-
TITLE		[] DELF	TE 3 1	THILE				☐ Change	Addition
NAME:			321	NAMÉ					
STREET ADDRESS					T ADDHESS				
CITY - ST - ZIP				CITY S	ST - 21P			Chares	☐ Addition
TITLE		☐ DELE		TITLE				Change	Magnion
NAME				NAME					
STREET ADDRESS					LADDRESS				
CITY-S1-ZIP					5T - 7.P			Change	☐ Addit on
TITLE		DELE		THUE				L. Unangs	- VIOQUE SI
NAME				NAME					
STREET ADDRESS					LADDRESS				
CITY-ST-ZIP				CHY S	ST-ZiF			☐ Change	☐ Additio/
TITLE		DELE		THLE				L. Cuange	☐ Medillo.
NAME				NAME					
			6.0	CIGIL	L MERCARCO				

14. Go hereby certify that the information supplied with this filing is voluntarily formsted 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 supplied entertal annual report is true and accurate and that my signature shall have the same logal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee en powered 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 NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR