


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

FILED
May 01 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000030992 (7)			
1. Corporation Name MR. HOMEMADE, INC.			
Principal Place of Business 1765 GULF TO BAY BOULEVARD CLEARWATER FL 34615		Mailing Address 1765 GULF TO BAY BOULEVARD CLEARWATER FL 34615-6506	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified 04/09/1996		3a. Date of Last Report 04/09/1996	
4. FEI Number 59-3374560		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent AMERILAWYER CHARTERED 343 ALMERIA AVENUE CORAL GABLES FL 33134		10. Name and Address of New Registered Agent 81 Name ASPASIA PAPADOPOULOS 82 Street Address (P.O. Box Number is Not Acceptable) 1765 GULF TO BAY BLVD 83 84 City CLEARWATER FL 85 Zip Code 34615	
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 <i>Aspasia Papadopoulos</i> Signature typed or printed name of registered agent and title if applicable.		DATE 4/25/97 (NOTE: Registered Agent signature required when reinstalling)	
12. OFFICERS AND DIRECTORS 12.1 NAME PSTD PAPADOPOULOS, ASPASIA 12.2 STREET ADDRESS 1765 GULF TO BAY BOULEVARD 12.3 CITY - ST - ZIP CLEARWATER FL 34615 12.4 TITLE 12.5 NAME 12.6 STREET ADDRESS 12.7 CITY - ST - ZIP 12.8 TITLE 12.9 NAME 12.10 STREET ADDRESS 12.11 CITY - ST - ZIP 12.12 TITLE 12.13 NAME 12.14 STREET ADDRESS 12.15 CITY - ST - ZIP 12.16 TITLE 12.17 NAME 12.18 STREET ADDRESS 12.19 CITY - ST - ZIP 12.20 TITLE 12.21 NAME 12.22 STREET ADDRESS 12.23 CITY - ST - ZIP 12.24 TITLE 12.25 NAME 12.26 STREET ADDRESS 12.27 CITY - ST - ZIP 12.28 TITLE 12.29 NAME 12.30 STREET ADDRESS 12.31 CITY - ST - ZIP 12.32 TITLE 12.33 NAME 12.34 STREET ADDRESS 12.35 CITY - ST - ZIP 12.36 TITLE 12.37 NAME 12.38 STREET ADDRESS 12.39 CITY - ST - ZIP 12.40 TITLE 12.41 NAME 12.42 STREET ADDRESS 12.43 CITY - ST - ZIP 12.44 TITLE 12.45 NAME 12.46 STREET ADDRESS 12.47 CITY - ST - ZIP 12.48 TITLE 12.49 NAME 12.50 STREET ADDRESS 12.51 CITY - ST - ZIP 12.52 TITLE 12.53 NAME 12.54 STREET ADDRESS 12.55 CITY - ST - ZIP 12.56 TITLE 12.57 NAME 12.58 STREET ADDRESS 12.59 CITY - ST - ZIP 12.60 TITLE 12.61 NAME 12.62 STREET ADDRESS 12.63 CITY - ST - ZIP 12.64 TITLE 12.65 NAME 12.66 STREET ADDRESS 12.67 CITY - ST - ZIP 12.68 TITLE 12.69 NAME 12.70 STREET ADDRESS 12.71 CITY - ST - ZIP 12.72 TITLE 12.73 NAME 12.74 STREET ADDRESS 12.75 CITY - ST - ZIP 12.76 TITLE 12.77 NAME 12.78 STREET ADDRESS 12.79 CITY - ST - ZIP 12.80 TITLE 12.81 NAME 12.82 STREET ADDRESS 12.83 CITY - ST - ZIP 12.84 TITLE 12.85 NAME 12.86 STREET ADDRESS 12.87 CITY - ST - ZIP 12.88 TITLE 12.89 NAME 12.90 STREET ADDRESS 12.91 CITY - ST - ZIP 12.92 TITLE 12.93 NAME 12.94 STREET ADDRESS 12.95 CITY - ST - ZIP 12.96 TITLE 12.97 NAME 12.98 STREET ADDRESS 12.99 CITY - ST - ZIP 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13.1 TITLE 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY - ST - ZIP 13.5 TITLE 13.6 NAME 13.7 STREET ADDRESS 13.8 CITY - ST - ZIP 13.9 TITLE 13.10 NAME 13.11 STREET ADDRESS 13.12 CITY - ST - ZIP 13.13 TITLE 13.14 NAME 13.15 STREET ADDRESS 13.16 CITY - ST - ZIP 13.17 TITLE 13.18 NAME 13.19 STREET ADDRESS 13.20 CITY - ST - ZIP 13.21 TITLE 13.22 NAME 13.23 STREET ADDRESS 13.24 CITY - ST - ZIP 13.25 TITLE 13.26 NAME 13.27 STREET ADDRESS 13.28 CITY - ST - ZIP 13.29 TITLE 13.30 NAME 13.31 STREET ADDRESS 13.32 CITY - ST - ZIP 13.33 TITLE 13.34 NAME 13.35 STREET ADDRESS 13.36 CITY - ST - ZIP 13.37 TITLE 13.38 NAME 13.39 STREET ADDRESS 13.40 CITY - ST - ZIP 13.41 TITLE 13.42 NAME 13.43 STREET ADDRESS 13.44 CITY - ST - ZIP 13.45 TITLE 13.46 NAME 13.47 STREET ADDRESS 13.48 CITY - ST - ZIP 13.49 TITLE 13.50 NAME 13.51 STREET ADDRESS 13.52 CITY - ST - ZIP 13.53 TITLE 13.54 NAME 13.55 STREET ADDRESS 13.56 CITY - ST - ZIP 13.57 TITLE 13.58 NAME 13.59 STREET ADDRESS 13.60 CITY - ST - ZIP 13.61 TITLE 13.62 NAME 13.63 STREET ADDRESS 13.64 CITY - ST - ZIP 13.65 TITLE 13.66 NAME 13.67 STREET ADDRESS 13.68 CITY - ST - ZIP 13.69 TITLE 13.70 NAME 13.71 STREET ADDRESS 13.72 CITY - ST - ZIP 13.73 TITLE 13.74 NAME 13.75 STREET ADDRESS 13.76 CITY - ST - ZIP 13.77 TITLE 13.78 NAME 13.79 STREET ADDRESS 13.80 CITY - ST - ZIP 13.81 TITLE 13.82 NAME 13.83 STREET ADDRESS 13.84 CITY - ST - ZIP 13.85 TITLE 13.86 NAME 13.87 STREET ADDRESS 13.88 CITY - ST - ZIP 13.89 TITLE 13.90 NAME 13.91 STREET ADDRESS 13.92 CITY - ST - ZIP 13.93 TITLE 13.94 NAME 13.95 STREET ADDRESS 13.96 CITY - ST - ZIP 13.97 TITLE 13.98 NAME 13.99 STREET ADDRESS 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 Block 12 or Block 13 if changed, or on an attachment with an address.			
SIGNATURE: <i>Aspasia Papadopoulos</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE 4/25/97 Daytime Phone #	

CR2E034 (9/96)