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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sanora B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

375902

(4)

MANN MADE ADDITIONS, INC.

Principal	Piace	of	Business
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Mailing Address



MIAMI FL 33155			4148 S.W. 70TH COURT MIAMI FL 33155			
					Date Incorporated or Qualified 01/21/1971	3a. Date of Last Report 03/27/1995
2. Principa! Pla	ace of Business	2a. Mailing A	Address		4. FEI Number	Applied For
21		26			59-1324627	Not Applicable
Suite, Apt. #		27	ot. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
[1		City & St	tate		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	[28]			Trust Fund Contribution	Added to Fees
24	25	Zip 29	Coun. 30	ry	8. This corporation has liability for in	
	g. Name and Address of Curr				Florida Statutes Yes 10. Name and Address of New Re	
				1 Name	10, Italia bilo Abdicas of New He	gistored Agent
MANN, I	BARRY R		د ا			
	W. 70TH COURT		ا ا	2 Street Add	ress (P.O. Box Number is Not Acceptable	e)
MIAMI F			Ë	3		
				4 Gitv		
			1	1 ***,		FL 85 Zip Code
	o the previsions of Sections 607.05 ed agent, or both, in the State of Ftc h, and accept the obligations of, Se			named corpor poration's boa	ration submits this statement for the purp rd of directors. I hereby accept the appoi	ose of changing its registered office ntment as registered agent. I am
SIGNATURE						
	Signature, typed or printed name of registeres ap-	ettandittli if applicate	(NOTE: Fragistored A	eni signature require	d when reinstiding)	DATE
12.		NO DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	PD	LJ	DELETE 1.1 TILL			Change Addition
NAME OTOSET ADODGO	MANN,BARRY R		1.2 NAM			
STREET ADDRESS	4148 SW 70TH COURT			ET ADDRESS		ļi
CHTY-ST-ZIP TITLE	MIAMI FL D			· ST - Zif		
NAME	MAURI. PEDRO R	LJ				Change C Addition
STREET ADDRESS	3100 NW 2 ST		22 NAM			
CITY-ST-ZIP	MIAMI FL			ET ADDRESS		
TITLE	MIAMI FL		DELETE 24 COLY			
NAME		LJ				Change Addition
STREET ADDRESS			3.2 NAM	ET ADDRESS		•
CITY-ST-ZIP			3 3. STH			
TITLE			DELETE 4 1 TITL			Change Addition
NAME		LJ	4.2 NAM			
STREET ADDRESS				EL ADDRESS		
CITY-ST-ZIP			4.4 CITY			
TIFLE			DELETE 5 1 THE			Change Addition
NAME			5 2 NAM			El anonac El nominal
STREET ADDRESS			5.3 S*RF	1 ADORESS		
CITY - ST - ZIP			5.4 CiTY			
THLE			DELETE 6 1 TITLE	* 9 1 1: 1:		Change Addition
NAME			62 NAME			
STREET ADDRESS			63 SIRE	1 ADDRESS		
CITY-ST-ZIP			6.4 CITY-	SI-ZP		

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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 16 if changed, or on an attachment with an address.

SIGNATURE: