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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 416700

(3)

JOSEPH MANNINO INC.

A Comment	
Principal Place of Business	Mailing Address
2455 NW 115TH DRIVE CORAL SPRINGS FL 33065	2455 NW 115TH DRIVE CORAL SPRINGS FL 33065-3427

## FILED May 08 1997 8:00am Secretary of State

2. Mailing Address   2a. Mailing Address   2b. Mailing Address   2									3. Date Incorporated or Qualified 3a. Date of East Report 01/12/1973 05/02/1996						
Suite, Apl. #, etc	2. Principal Place of Business 2a. Mailing Address									1 00/0	2/ 1001				
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Strict   Status Desired   St.75 Additional   St.75 Additiona	lands '			26]	len −η "			ŀ				Not Applicable			
City & State   Country   Zip   Added to Foes   Added to Fees   Zip				Suite, Ap	-4					<u>.</u>	\$8.7	5 Additional			
Zip	22									5. Certificate of Status Desired	⊔	Fee	Required		
Zip		te		City & S	tate					6. Election Campaign Financing \$5.00 May Re					
28							Trust Fund Contribution				Add	od to Fees			
9, Name and Address of Current Registered Agent  MANNINO, VINCENT 2455 NW 115TH DR CORAL SPRINGS FL 33065  81  82  Street Address (P.O. Box Number is Not Acceptable)  83  84  City FL  85  Street Address (P.O. Box Number is Not Acceptable)  83  84  City FL  85  Zip Code  91. Pursuant to the provisions of Sections 607 (500 and 607 1508, Florida Statules, the shore-named corporation submits this statement for the purpose of changing its registered agent 1 am familiar with, and accept the obligations of, Section 607 (500, Florida Statules, Stat	<del></del>		<del></del> -	F1		H- 13	ountry					av unde	r s. 199.032,		
MANNINO, VINCENT 2455 NW 115TH DR CORAL SPRINGS FL 33065  84 City FL 85 Zyp Code  471. Pursuant to the provisions of Sections 607.0502 and 607 15:08, Florida Statulos, the above-named corporation submits this statement for the purpose of changing its registered of circles 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, and accept the obligations of Section 007 05:05, Florida Statulos.  SIGNATURE Signature, typed or pointed name of registered agent and late if applicable.  RECT. Fregistered Agent agent agent and late if applicable.  RECT. Fregistered Agent a	24					30									
2455 NW 115TH DR CORAL SPRINGS FL 33065  82 Street Address (P.O. Box Number is Not Acceptable)  83 64 City FL 85 City FL 86 City FL 86 City FL 87 City FL 88 City FC Code FL 88 City Code FL 88 City FL 88 City Code FL 88 City FL 88 City Code Code Code Code Code Code Code Code			<del></del>	nt Hegistered Ag	ent 		01	Nome .	· · · · · · · · · · · · · · · · · · ·						
CORAL SPRINGS FL 33065  83  84 City  FL  85 Zip Code  T1. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florids Statutes, the above named corporation submits this statument for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's beard of directors. Thereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE    Signature, typed or printed name of registered agent and little flagericulity.	MAI	NNINO, VIN	CENT					or Name							
83   84   City							82	82 Street Address (P.O. Box Number is Not Acceptable)							
11. Pursuant to the provisions of Socilons 607.05.02 and 607.15.08, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of, Socilon 607.05.05, Florida Statutes.    Signature	COI	RAL SPHIN	GS FL 33065				92								
11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statules, the above-hanced corporation's board of directors. I hereby accept the approintment as registered agent, a both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the approintment as registered agent, and accept the obligations of, Soction 607.0505, Florida Statules.    Signature							63								
The provisions of Sections 607 0502 and 607 1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, at both, in the State of Florida. Such change was aith orized by the corporation's board of directors. Thereby accept the appointment as registered agent, at m familiar with, and accept the obligations of, Section 607.0505, Florida Statules.    Signature							84	City				85 2	η Code		
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.    SIGNATURE	44 Durawant	to the provin	sions of Contions 607.00	20 and 607 16 00	Florido Ctatul	lan tha				tion adams to this statement for the same	<u> </u>				
SIGNATURE    Signature, typed or printed name of registered age at and little if ageticalitie. (NOTE fregistered Agent signature (equired when recreating).   DATE	office or a	registered ac	gent, or both, in the State	of Florida, Such	change was a	authoria	zed by	the corpo	orpore oration	ation submits this statement for the p 's board of directors. I hereby accep	urpose or t the appo	enangın pintment	g its registered		
Signature, typed or printed name of registered again that Bits of synthesis (NOTE Expeliced Again signature (equipped when to installing)   DATE	agent la	am familiar w	ith, and accept the oblig	ations of, Section	607.0505, Fk	orida S	lalules	3.							
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE P DELETE 1.1 THE	SIGNATURE	Clanal was turned	der printed parties of semiclared an	out and little if an old out to	- (NICS)	ii ii				the standard	To 644				
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CITY-ST-ZIP 64 CITY-ST-7IP	CITY-ST-ZIP					6.4	ı ÇITY-S	1 - ZIP							

4. 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 33 if changed, or on an attachment with an address.

NONATURE TO TAKE