



FILED

Apr 17 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Apr 17 1997 8:00am Secretary of State	
DOCUMENT # 447086 (0) 1. Corporation Name UTILITY BAGS, INC.					
Principal Place of Business 313 WEST CENTRAL AVENUE HOWEY-IN-THE-HILLS FL 34737		Mailing Address 313 WEST CENTRAL AVENUE HOWEY-IN-THE-HILLS FL 34737-3802		3. Date Incorporated or Qualified 03/01/1974 3a. Date of Last Report 04/15/1996	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		4. FEI Number 57-8425070 Correct number is 59-1603974 Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No	
9. Name and Address of Current Registered Agent DUNCAN, C. MICHAEL 225 WEST MAIN ST. TAVARES FL				10. Name and Address of New Registered Agent 81 Name Frank Romano Jr. 82 Street Address (P.O. Box Number is Not Acceptable) 607 N. Lakeshore Dr. 83 84 City Howey-in-the-Hills, FL 85 Zip Code 34737	
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: Frank Romano Frank Romano Jr., President DATE: 4-10-97					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1. TITLE NAME STREET ADDRESS CITY-ST-ZIP 2. TITLE NAME STREET ADDRESS CITY-ST-ZIP 3. TITLE NAME STREET ADDRESS CITY-ST-ZIP 4. TITLE NAME STREET ADDRESS CITY-ST-ZIP			1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		
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: Frank Romano DATE: 4/10/97 352-324-3606					

CR2E034 (9/96)