

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

**FILED**

**May 02 1997 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 468765 (3)**

1. Corporation Name  
**PINTO ENTERPRISES, INC.**



Principal Place of Business <b>7555 SOUTH US HIGHWAY 1 TITUSVILLE FL</b>	Mailing Address <b>7555 SOUTH US HIGHWAY 1 TITUSVILLE FL 32780-6137</b>
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified <b>01/30/1975</b>	3a. Date of Last Report <b>10/07/1996</b>
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number <b>59-1592658</b>	Applied For <input type="checkbox"/> Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
24. Country	29. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
<b>PINTO INDIALYNE E 7555 S US HWY 1 TITUSVILLE FL 32780</b>		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83.	
		84. City	<b>FL</b>

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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12	
TITLE	<b>PD</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PINTO, RAYMOND R</b>	1.2 NAME	
STREET ADDRESS	<b>2519 CRICKET TRAIL</b>	1.3 STREET ADDRESS	
CITY - ST - ZIP	<b>TITUSVILLE FL 32780</b>	1.4 CITY - ST - ZIP	
TITLE	<b>STD</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PINTO, INDIALYNE E</b>	2.2 NAME	
STREET ADDRESS	<b>2519 CRICKET TRAIL</b>	2.3 STREET ADDRESS	
CITY - ST - ZIP	<b>TITUSVILLE FL 32780</b>	2.4 CITY - ST - ZIP	
TITLE	<b>CD</b> <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MORRIS, BRENDA SUE</b>	3.2 NAME	
STREET ADDRESS	<b>5915 STILLWATER AVENUE</b>	3.3 STREET ADDRESS	
CITY - ST - ZIP	<b>COCOA FL 32927</b>	3.4 CITY - ST - ZIP	
TITLE	<b>VPD</b> <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MORRIS, JAMES P</b>	4.2 NAME	
STREET ADDRESS	<b>5915 STILLWATER AVENUE</b>	4.3 STREET ADDRESS	
CITY - ST - ZIP	<b>COCOA FL 32927</b>	4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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: *[Signature]* DATE: **April 24, 1997** 402-267-285

CR2E034 (9/96)