## 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 # 575124

(3)

JOE MOLNAR ENTERPRISES, INC.

**FILED** Jan 30 1997 8:00am Secretary of State

Principal Place of Business Maiting Address						1 FOUND I WILLER FOLDEN WARRY 33 MAIN 81 MAS AND AND A	MIMIT BEBEI	MANASA MANASA MELANI	
7118 E. SAHAURO DRIVE 8415 KACHINA DRIVE									
SCOTTSDALE	AZ 85254	TEMPE AZ 85284-2517 US							
US		US				3. Date Incorporated or Qualified	<b>3a</b> . D	ate of Last R	eport
						06/02/1978		09/1996	
2. Principal P	ace of Business	2a. Mailing Address				4. FEI Number	7		plied For
21		26				59-1841697		No	ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired	П	\$8.75	Additional
27						5. Cermicate of Status Desired		Fee Re	equired
City & State City & State						6. Election Campaign Financing	_	\$5.00	May Be
23		28				Trust Fund Contribution	Ц_		to Fees
Zip	Country	Žφ	Coun	itry		8. This corporation has liability for	intangible	tay under s	. <b>199</b> ,032,
24	25   9. Name and Address of Curre		30			Florida Statutes  10. Name and Address of New Re		No Assert	
		II negistered Agent	<del>-</del>  -	B1	Name	IO. Name and Address of New No	Signan	Agent	
	AIN, GEORGE R.				7101110				
	SECOND STREET		82 Street Add			ress (P.O. Box Number is Not Acceptab	ole)		
STE 717			<u> </u>	B3				<del></del>	
SAH	ASOTA FL 34236								
			1	B4	City		FL	<b>85</b> Zip	Code
11 Purcuant	to the provisions of Sections 607 050	22 and 607 1508 Florida Statute	s the ab		-named cor	position submite this statement for the r		of changing if	e registered
office or r agent I a	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was a pations of, Section 607.0505, Flor pations of the section of the	uthorized rida Statu	by ites	the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	ot the ap	oointment as	registered
SIGNATURE	Signature, typed or printed name of registered ag	ont and tille if sontratile (NOTE	Registered	Ager	nt signature requi	ired when reinstating)	DATE		
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		D DIRECTOR	RS IN 12
TITLE	Р	☐ DELETE	1.1 TiTL	E				Change	Addition
NAME	Molnar, Joseph Steven		1.2 NAM	ΛE					
STREET ADDRESS	8415 KACHINA DR.		1.3 STR	EET /	ADORESS				
CrTY+ST+ZIP	TEMPE AZ		1.4 CIT	Y-ST	r-ZIP	_		85	284
TOTLE	VP	☐ OELETE	2 1 TITE	2 1 TITLE				Change	Addition
NAME	MOLNAR, HELENA		2.2 NAN	ΜE					
STREET ADDRESS	8415 KACHINA DR.		23 STR	EET /	ADDRESS	41°		~	<b>.</b>
CITY-S1-ZIP	TEMPE AZ		2 4 CIT	2 4 CITY+ST-ZIP					5284
TITLE		☐ DELETE	3 1 TITE	E				Change	Addition
NAME			32 NA	ME					
STREET ADDRESS			3.3 STR	EET	address				
CITY-S1-7IP			3.4. CIT		1 - ZIP			<del> </del>	
TITLE		☐ DELETE	4.1 TITL	LÉ				Change	Addition
NAME			4. 2 NA	ME					
STREET ADDRESS			4.3 STR	REET	ADDRESS				
CITY+ST+ZIP			4.4 CIT	Y - S1	r- ZIP				
TITLE		☐ DELETE	5.1 T(T)	LE				Change	Addition
NAME			5.2 NAM	ME					
STREET ADDRESS			5.3 STR	REET	ADDRESS				
CITY-ST-ZIP			5.4 CIT	Y-\$1	r-ZIP			<del></del>	
TITLE		☐ DELETE	6.1 TIT	LE				Change	Addition
NAME			6.2 NA)	ME					
STREET ADDRESS			6.3 STR	IEET .	ADDRESS				
CITY-S1-ZIP			6.4 CIT	Y-SI	i - ZiP				· · · · · · · · · · · · · · · · · · ·

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:**