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**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** 575124

(3)

JOE MOLNAR ENTERPRISES, INC.

## **FILED** Jan 30 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 7118 E. SAHAURO DRIVE 8415 KACHINA DRIVE SCOTTSDALE AZ 85254 TEMPE AZ 85254 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/02/1978 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 7118 8 59-1841697 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible 8 24 25 30 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MCLAIN, GEORGE R. R1 Name 1800 SECOND STREET Street Address (P.O. Box Number is Not Acceptable) **STE 717** SARASOTA FL 34236 83 84 City 85 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change \_\_\_ Addition MOLNAR, JOSEPH STEVEN Molmar NAME E034 1.2 NAME 8415 KACHINA DR. STREET ADDRESS 24352 1.3 STREET ADDRESS TEMPE AZ CITY-ST-ZIP Sco H.Sda 1.4 CITY - ST - ZIP ☐ DELETE TITLE 2.1 TITLE MOLNAR, HELENA NAME 2.2 NAME Molnar, Helena 8415 KACHINA DR. St #1161 STREET ADDRESS 2.3 STREET ADDRESS Proeni4, Az TEMPE AZ CITY - ST - ZIP 2.4 CITY - ST-7IP DELETE TITLE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIF TOTLE DELETE Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 6.4 CITY-ST-ZIP

14. I 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: MILIMAT TOPMONT

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