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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 **DOCUMENT # 579619**

(8)

MICKEY PEPPER ENTERPRISES, INC.

Principal Place of Business Mailing Address 711 EAST OCEAN AVE 711 EAST OCEAN AVE **BOYNTON BEACH FL 33435 BOYNTON BEACH FL 33435-5101** 3a. Date of Last Report 3. Date Incorporated or Qualified 03/28/1996 07/20/1978 2. Principal Flace of Business 2a. Mailing Address 4. FEI Number Applied For Hw. 59-2134578 1100 5 Federal 21 26 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired حروبار ۲ Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 130ynton 23 28 Trust Fund Contribution Added to Fees Country Zip Country Zip a. This corporation has liability for intangible tax under s. 199.032, 3435 USA Yes 🔲 No Florida Statutes 24 25 29 g. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name CAIN. MICHAEL DENNIS **632 LAS PALMAS PARK** 82 Street Address (P.O. Box Number is Not Acceptable) **BOYNTON BEACH FL** 83 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) OFFICERS AND DIRECTORS 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PD □ DELETE Change Addition TITLE 1.1 TITLE CAIN, MICHAEL DENNIS 1.2 NAME NAME 632 LAS PALMAS PARK STREET ADDRESS 1.3 STREET ADDRESS **BOYNTON BEACH, FL 00000** CITY-ST-ZIP 14 CITY-ST-7IP vst DELETE Change Addition TITLE 2.1 TITLE CAIN, BACH MARILYN NAME 22 NAME 632 LAS PALMAS PARK STREET ADDRESS 2.3 STREET ADORESS BOYNTON BEACH, FL 00000 2.4 CITY-ST-ZIP CHY-\$1-20 DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-S1-ZIP DELETE Change Addition TAILE 4.1 TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE HILE NAMI 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CHTY-ST-ZIF 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

SIGNATURE

appears in Block 12 or Block 13

FILED

May 16 1997 8:00am

Secretary of State