

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

**FILED**  
**May 06 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # 590964 (3)**

1. Corporation Name  
**BEND 'N STRETCH, INC.**



Principal Place of Business: **7905 W. 20TH AVE. HIALEAH FL 33014-3229**

Mailing Address: **7905 W. 20TH AVE. HIALEAH FL 33014-3229**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	10/24/1978	04/18/1996
22	City & State	27	City & State	4. FEI Number	Applied For
23	Zip	28	Country	59-1864616	Not Applicable
24	Country	29	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
25		30		<input type="checkbox"/>	\$5.00 May Be Added to Fees
				6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>
				7. 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>HOWARD, MANO</b> <b>7905 NORTH 20TH AVE.</b> <b>HIALEAH FL 33014</b>				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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 ~~not~~ with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
D	HOWARD, KENNETH	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
	22 COUNTRY CLUB ROAD	1.3 STREET ADDRESS	6274 N.W. 23 WAY
	EASTCHESTER NY	1.4 CITY - ST - ZIP	Boca Raton, FL 33496
P	HOWARD, MANO	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	2735 STIRRUP LANE	2.2 NAME	
	FT. LAUDERDALE FL	2.3 STREET ADDRESS	
V	HOWARD, DAREN	2.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	2130 COVE LANE	3.1 TITLE	
	FT. LAUDERDALE FL	3.2 NAME	170 Dockside Circle
		3.3 STREET ADDRESS	Ft. Lauderdale, FL 33327
		3.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		4.1 TITLE	
		4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		5.1 TITLE	
		5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		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 applicable, as an attachment with an address.

SIGNATURE: \_\_\_\_\_ **President** **4/26/97** **305362229**

CR2E034 (9/96)