

FILE NOW: FILING FEE AFTER MAY 1 IS \$25.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 619262 (9)

1. Corporation Name
PILA & PILA, INC.



Principal Place of Business: 14115 FENNSBURY DR TAMPA FL 33624
Mailing Address: 14115 FENNSBURY DR TAMPA FL 33624

3. Date Incorporated or Qualified: 05/01/1979
3a. Date of Last Report: 03/28/1995
4. FEI Number: 59-1906729
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country 25
2a. Mailing Address: 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30

9. Name and Address of Current Registered Agent

PILA, MORITZ
14115 FENNSBURY DR.
TAMPA, FLORIDA
33624

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 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)

DATE

12. OFFICERS AND DIRECTORS

TITLE	S	<input type="checkbox"/> DELETE
NAME	PILA, HARRIETT	
STREET ADDRESS	4516 S AMPTON COURT	
CITY-ST-ZIP	TAMPA, FLORIDA 00000	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	PILA, ESTHER	
STREET ADDRESS	3301 BAYSHORE BLVD #1906	
CITY-ST-ZIP	TAMPA, FLORIDA 00000	
TITLE	P	<input type="checkbox"/> DELETE
NAME	PILA, KALMAN	
STREET ADDRESS	14011 SHADY SHORES DR	
CITY-ST-ZIP	TAMPA FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	PILA, KRESLA D	
STREET ADDRESS	4013 MURIEL PLACE	
CITY-ST-ZIP	TAMPA, FLORIDA 00000	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	PILA, MORITZ	
STREET ADDRESS	14115 FENNSBURY DRIVE	
CITY-ST-ZIP	TAMPA, FLORIDA 00000	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	PILA, BERNADETTE D	
STREET ADDRESS	3301 BAYSHORE BLVD #1906	
CITY-ST-ZIP	TAMPA, FLORIDA 00000	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Moritz S. Pila 3/11/96 813-878-4269

Date

Daytime Phone #

CR2E034 (12/95)