## 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 # 657441

(2)

## MANNY ENTERPRISES, INCORPORATED

Manual Adams Addison						Office Dark Collect		
Principal Place of Business		Mailing Address						
7020 SW 22ND COURT DAVIE 33317		7020 SW 22ND COURT DAVIE 33317-7137						
					3. Date Incorporated or Qualified 02/27/1980	3a. Date (		eport
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For			
21		26			59-2004710		No	Applicable
Suite, Apt. #. etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 A	dditional	
22		27		5. Certificate of Status Desireo		Fee Re	quired	
City & State		City & State		6. Election Campaign Financing		\$5.00	May Be	
23		28			Trust Fund Contribution		Added to	o Fees
Zιρ	Country	Zip	Count	try	8. This corporation has liability for i			199.032.
24	25	29	30			Yes 🔼 1		
9. Name and Address of Current Registered Agent				1 Name	10. Name and Address of New Re	gistered Age	nt.	
	VITERO, MANUEL		*	name				
7020 S.W. 22ND COURT			Ē	2 Street Add	ress (P.O. Box Number is Not Acceptab	le)	*****	
DAVIE FL 33317								
				3				
			8	4 City	, , , , , , , , , , , , , , , , , , ,		35 Zip (	Code
						FL [		
office or r	constered arient, or both, in the State a	of Florida. Such chance was	bacirodtus	by the corpora	poration submits this statement for the pation's board of directors. I hereby accept	urpose of ch	anging its	s registered registered
agent I a	im familiar with, and accept the obliga	tions of, Section 607,0505, F	lorida Statul	es.	morro bourt of amounts, thereby decop	, une appoint		og.cco.cu
SIGNATURE								
10	Signature, type dior printed natio of regions at legen			Igent signature requ	ired when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE	DECTOR	C INI 40
12.	OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFIC		Change	Addition
THILE	QUINTERO, MANUEL	[ ] Detrie					Onlange	L. Addition
NAME	7020 S.W. 22ND COURT		1.2 NAM	-				
STREET ADDRESS	DAVIE FL			ET ADDRESS				
C-TY - ST - ZIP	VP	DELETE		-ST-ZIP			Change	Addition
TITLE	QUINTERO, LORRAINE	☐ DETEIC	2.1 TITL	ì		-	Change	LI AGUIDITI
NAME	7020 S.W. 22ND COURT		2.2 NAN	·				
STREET ADDRESS	DAVIE FL			EET ADDRESS				
C-TY - ST - ZIP	S S	DELETE		Y-\$1-ZIP			C	Addition
TITLE	l •	DELETE	3.1 TITL		•	L	] Change	Addition
NAM <del>E</del>	LICATA, RAQUEL 7020 S.W. 22ND CT.		3.2 NAM	- }				
STREET ADDRESS				EET ADDRESS				
CITY - ST - ZIP	DAVIE FL	[] oc		Y-ST-ZIP	······································		105	A (40)
TIFLE		() DELETE	4.1 TITL	·		L.	] Change	Addition
NAME			4. 2 NA	·-				
STREET ADDRESS			4.3 STR	EET ADORESS				
CITY - ST - 7IP				-ST-ZIP			<u> </u>	
TILLE		☐ DELETE	5 1 TITE	E I			Change	Addition

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 B-ock 12 or Block 3 if changed, or on an attachment with an address.

6.4 CITY-ST-ZIP

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-2IP

**SIGNATURE:** 

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

CITY-\$1-7P

CITY-ST-ZIP

THE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

LOW LORRAINE QUINTER 1/17/96 954 472-4008 V

Change

Addition

**FILED** 

Jan 23 1997 8:00am

Secretary of State