FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name	678334	(4)	
TONY & FELICIA,	INC.		
Principal Place of Business		Mailing Aridress	

346 E. DANIA BEACH BLVD. DANIA FL 33004

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					3. Date Incorporated or Qualified	3a. Date of Last Report
					07/14/1980	04/17/1995
2. Principal F	Place of Business	2a. Mailing Add	ess		4. FEI Number	Applied For
1		26			59-2010117	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #	, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	de	City & State			Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
<i>Ζ</i> φ	Country 25	. Zip 29	30	ntry	This corporation has liability for i Florida Statutes	<u> </u>
· · · · · · · · · · · · · · · · ·	g. Name and Address of Cur	rrent Registered Agent			10. Name and Address of New R	egistered Agent
				81 Name		
3317	ANOS, FELICIA MCKINLEY STREET LYWOOD FL 33021			82 Street Add	ress (P.O. Box Number is Not Acceptab	Fee Required \$5.00 May Be Added to Fees angible tax under s 199.032, No gistered Agent
				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 Sections 807.0502 and 607.1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent. I am footback the statement for the purpose of Sections 807.0502 and 607.1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent. I am

ÎSI	grature, typed or printed name of regist-yed a jent and the	::	It. Registered Agent signature regional	
12.	OFFICERS AND DIF	A. A. 14 A. A. F. B. C. C. C. C. G. C.	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
THE	P	DELETE	1 1 TITLE	☐ Change ☐ Additi
NAME	GALANOS, FELICIA		1.2 NAME	
STREET ADDRESS	3317 MCKINLEY ST.		1.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL 33021		1.4 C(TY - \$1 - Z)P	
TILE	S	DELETE	2 1 TIFLE	Change Additi
NAME	GALANOS, ANTONIOS		2 ? NAME	
STREET ADDRESS	3317 MCKINLEY ST.		2.3 STREET ADDRESS	
CHTY - ST - ZIP	HOLLYWOOD FL 33021		2.4 CiTY - ST. ZiF	
TITLE		☐ DELETE	3 1 Tall#	Change Additi
KAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY - S1 - ZIP	
TITLE		[] DELETE	4 1 1 ITLE	Change Additi
NAME			4.2 NAMf	
STREET ADDRESS			4.3 STREET ADDRESS	
City SE-ZIP			4 4 CITY - S* - 716*	
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NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	, ,
CHY-SI-ZIP			5.4 CITY - \$1 - 2IP	
TIT_E		☐ DELETE	6 1 TillE	Change 🔲 Addit
NAME			6 2 NAME	
STREET ADDRESS			63 STREET ADDRESS	
C(1v - S1 - 7)F			6.4 D/TY - \$1 - 7/P	

14. Ldo hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. Ffurther 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 cath; 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 chapted, or on an attackage with an address.

SIGNATURE: