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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # E76646

1. Corporation Name MAESTRO'S, INCORPORATED Principal Place of Business Mailing Address * ALEX P MACAR 14522 N BLVD 14522 N BLVD TAMPA FL 33613 1452 T AMPA FL 33613					
				Date Incorporated or Qualified 04/19/1982	3a. Date of Last Report 05/10/1996
້າ	Place of Busir ess	26. Mailing Address		4. FEI Number 59-2187462	Applied For Not Applicable
Surte, Apt	#, elc	Suite, Apt. #, etc.			\$8.75 Additional
2		27		5. Certificate of Status Desired	Fee Required
Orty & State	<i>(</i> -	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	or intangible tax under s. 199.032,
<u> </u>	25	29	30		Yes No
MAC	9. Name and Address of Cur CAR, ALEX P	rent Hegistereo Agent	B1 Name	10. Name and Address of New F	1egistered Agent
	27 Florida avenue IPA FL 33612		83	ress (P.O. Box Number is Not Accept TORIDA	MAG
H. Dare cart	to the receive one of Continue 6627	15.00 and 607 15.09 Florido Statuti	84 City	poration submits this statement for the	FL 85 Zip Code 33613
Office or r	registered agent, or both, in the St	ate of Florida, Such channe was a	authorized by the cornora	tion's hoard of directors. I hereby acc	ent the approintment as registered
agent La	am famil ar with, and accept the ob	ligations of, Section 607,0505, Flo	orida Statutes.	tion's board of directors. I hereby acc	opt the appointment as registered
agont La SiGNATURE					
SIGNATURE	Suprance, typest or printed name of requirered		orida Statutes. E. Registered Agent signature requ		DATE
SIGNATURE	Styradice, typed or protect name of registrated OFFICERS a	agent and to enflapp Loatet (NOT)	E: Brigistered Agent signature required. 13. 11 TiffLE	ired when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS IN 12 Change Addition
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Secretary of State