

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F95000001306 (8)

1. Corporation Name

FRANK AND GLADYS, INC.



Principal Place of Business

1953 N. UNIVERSITY DRIVE
CORAL SPRINGS FL 33071

Mailing Address

1953 N. UNIVERSITY DRIVE
CORAL SPRINGS FL 33071

2. Principal Place of Business

2a. Mailing Address

26 5853 NW 40 AVE
Suite, Apt. #, etc.

27 City & State

28 COCONUT CREEK, FL
City & State

29 Zip

29 33073

30 Country

30 USA

3. Date Incorporated or Qualified

03/20/1995

3a. Date of Last Report

4. FEI Number

65-0555064

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 190.032,
Florida Statutes. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

JAMES F. CATTERSON

82 Street Address (P.O. Box Number is Not Acceptable)

5853 NW 40 AVE

83

84 City

COCONUT CREEK

FL

85 Zip Code

33073

11. Pursuant to the provisions of Sections 607.0702 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 607.0705, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Print Name and Title)

Signature of Agent Submitting Report (Print Name and Title)

Date

12. OFFICERS AND DIRECTORS

TITLE	PCD	☐ DELETE
NAME	CATTERSON, GLADYS	
STREET ADDRESS	5853 NW 40TH AVENUE	
CITY-STATE-ZIP	COCONUT CREEK FL	
TITLE	VD	☐ DELETE
NAME	CATTERSON, JAMES	
STREET ADDRESS	5853 NW 40TH AVENUE	
CITY-STATE-ZIP	COCONUT CREEK FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13.

1. NAME		☐ Change ☐ Addition
2. NAME		
3. STREET ADDRESS		
4. CITY-STATE-ZIP		
5. NAME		☐ Change ☐ Addition
6. NAME		
7. STREET ADDRESS		
8. CITY-STATE-ZIP		
9. NAME		☐ Change ☐ Addition
10. NAME		
11. STREET ADDRESS		
12. CITY-STATE-ZIP		
13. NAME		☐ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY-STATE-ZIP		
17. NAME		☐ Change ☐ Addition
18. NAME		
19. STREET ADDRESS		
20. CITY-STATE-ZIP		

14. I 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)(g), Florida Statutes. I further certify that the information indicated on this and my 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:

JAMES F. CATTERSON VP
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JAMES F. CATTERSON

4/1/96 954-481-8698

CR2E034 (12/95)