## 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 # H38924

(7)

FRANKOW ENTERPRISES, INC.

## **FILED** Mar 14 1997 8:00am Secretary of State



Principal Plac	o of Business	Mailing Address							
6150 SW 15TH POMPANO BCH	ST.	6150 SW 15TH ST. POMPANO BCH FL 33068-4533							
						3. Date Incorporated or Qualified 01/21/1985	.	te of Last 4/1996	
	face of Business	2a. Mailing Address	r hiriji — T			4, FEI Number Applied For			
Suite, Apt.	#. e1c.	Suite, Apt. #, etc.			\$8.75 Additional			Not Applicable	
22	., ., .	27				5. Certificate of Status Desired	L		Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be				
23		28			Trust Fund Contribution Added to Fees				
Zip Country 25		Zip			8. This corporation has liability for intengible tax under s. 199.032, Florida Statutes Yes No				
24	9. Name and Address of Currer	4 4	_[30]			10. Name and Address of New Re			
FRA	NKOW, DOUGLAS G.			81	Name			. <del></del>	
	SW 15TH ST.		}	82	Street Add	eet Address (P.O. Box Number is Not Acceptable)			
	IPANO BCH. FL 33068								
			l'	83					
			-	84	City		FI	<b>85</b> Zig	) Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida State	utes, the ab		-named corp	poration submits this statement for the	ourpose of	changing	its registered
office or r agent. I a	egistered agent, or both, in the State on familiar with, and accept the oblig	e of Florida. Such change was lations of, Section 607.0505, F	s authorized Horida Statu	by ites	the corporat	tion's board of directors. I hereby acce	pt the app	ointment a	s registered
SIGNATURE		•							
	Signature, typed or printed natural registered aga	ent and mic if applicable (NO ID DIRECTORS		Ager	nt signature requi	red wher reinstating)	DATE OF DO AND	DIDECTO	DC INL 10
12. TITLE	PTS	DELETE	13.			ADDITIONS/CHANGES TO OFF	CENS AND	Change	
NAME	FRANKOW, DOUGLAS G.		1.2 NA	νE					
STREET ADDRESS	6150 SW 15TH ST.		1.3 STH	REFT.	ADDRESS				
CITY-ST-ZIP	POMPANO BCH FL		1.4 OIT	Y - S1	1 - 71P				
TITLE		LL DELETE	2 1 1111	J.	ļ			Change	Addition
NAME			2 2 NA						
STREET ADDRESS					ADDRESS				
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NAME			4. 2 NA	ME					l
STREET ADDRESS			4.3 STR	EFT A	ADDRESS				
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TITLE		☐ DEL€ IL	5 1 1111					Change	Addition
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STREET ADDRESS			5.3 S1R 5.4 C(1)		ADORESS				
CITY-ST-ZIP TITLE		DELFTE	6.1 Tilti					Change	Addition
NAME			6.2 NAM						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			6.4 Cil 1		1				
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