


FILED


Mar 12 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

Mar 12 1997 8:00am
Secretary of State



DOCUMENT # J01819 (8)
1. Corporation Name
MUNCH BUNCH, INC.

Principal Place of Business
4068 NE 8 AVE
FORT LAUDERDALE FL 33334
US

Mailing Address
4068 NE 8 AVE
FORT LAUDERDALE FL 33334-3004
US

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

3. Date Incorporated or Qualified
03/03/1986

3a. Date of Last Report
04/18/1996

4. FEI Number
59-2649651

5. Certificate of Status Desired
\$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution
\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes
Yes No

9. Name and Address of Current Registered Agent
MUCHNICK, RON
4068 NE 8 AVE
FORT LAUDERDALE FL 33334

10. Name and Address of New Registered Agent
81 Name STEVEN ANDREWS
82 Street Address (P.O. Box Number is Not Acceptable)
83 4068 NE 8 AVE.
84 City FT. LAUDERDALE FL 85 Zip Code 33334

11. Pursuant to the provisions of Sections 607.0502 and 607.1408, 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 607.0505, Florida Statutes.
SIGNATURE: [Signature] STEVEN ANDREWS, PRES. X 2-27-97
Signature typed or printed name of registered agent and fee, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
1.1 TITLE DP
1.2 NAME MUCHNICK, RON
1.3 STREET ADDRESS 4068 NE 8 AVE
1.4 CITY-ST-ZIP FORT LAUDERDALE FL
1.5 TITLE
1.6 NAME
1.7 STREET ADDRESS
1.8 CITY-ST-ZIP
1.9 TITLE
1.10 NAME
1.11 STREET ADDRESS
1.12 CITY-ST-ZIP
1.13 TITLE
1.14 NAME
1.15 STREET ADDRESS
1.16 CITY-ST-ZIP
1.17 TITLE
1.18 NAME
1.19 STREET ADDRESS
1.20 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
2.5 TITLE
2.6 NAME
2.7 STREET ADDRESS
2.8 CITY-ST-ZIP
2.9 TITLE
2.10 NAME
2.11 STREET ADDRESS
2.12 CITY-ST-ZIP
2.13 TITLE
2.14 NAME
2.15 STREET ADDRESS
2.16 CITY-ST-ZIP
2.17 TITLE
2.18 NAME
2.19 STREET ADDRESS
2.20 CITY-ST-ZIP

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 Block 12 or Block 13 if changed, or on an attachment with an address.
SIGNATURE: [Signature] PRES. X 2-27-97 (954) 563-9599
Signature typed or printed name of signing officer or director Date Daytime Phone #