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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J19720

(8)

 Corporation Name CINDY'S EUROPEAN IMPORTS, INC.

FILED Jun 05 1996 8:00 am Secretary of State

1 15 B B B		I MINIS MENIT MINIS NAME NIMIT IN
- 1 8 9 8 19 8 18		
	1684 (188 1) (1881) 18 44 (1884)	

								() B180) (\$\$)
Principal Place	of Business	Mailing Address					- • · · · - · -	
320 E. FLETCH	ER AVE.	320 E. FLETCHER AVE.						
TAMPA FL 33612		TAMPA FL 33612		Date Incorporated or Qualified	3a. Date o	of Last Ber		
					06/17/1986		01/1995	
2. Principal Pla	on of Business	2a. Mailing Address			4. FEI Number	<u> </u>		pplied For
z. Principairia	ice of Disamess	26 1630 Dai	quiri	hane	59-2870760			ot Applicable
Suite, Apt. #	t, etc.	Suite, Apt. #, etc.	· U		5. Certificate of Status Desired		,	Additional
2		27					—: 	equired
City & State		City & State	26		Election Campaign Financing Trust Fund Contribution			May Be to Fees
3		120 March	Countr		This corporation has liability for it	otaooible tax		
_ Ζφ 	Country	29 33549	30 US		Florida Statutes Yes	□ No		,
4	9. Name and Address of Currer	29 335471	1301 14	٠, د	10. Name and Address of New R	egistered A	gent	
	g, Italia dia Addicas at a series		81	1 Name				
MROCZKOWSKI, CINDY 82 S			Ctroot Ad	dress (P.O. Box Number is Not Acceptab	le)			
	ETCHER AVE		82 Street Add		iress (i .o. Exx righteen to rice) to expense			
TAMPA F			8:	3				
IMMEAT	L 33012		8-	4 City			85 Zip	Code
			1	1 '	oration submits this statement for the pur	FL		
	Signature intention probed have of registered ages			jert signat ne rojei	ADDITIONS/CHANGES TO OFF	DATE	DIRECTOR	RS IN 12
12.		ID DIRECTORS	13. 1 1 Tillu		ADDITIONS OF IANGEO TO OTT		1 Charige	☐ Addition
TIFLE	DP		1 2 NAM					
NAME	MROCZKOWSKI, CYNTHIA G	•		ELI ADDRESS	1527 N. Pale M. Lutz, FL 3350	abry	Amil	المداف
STREET ADDRESS	100 S ASHLEY DR. #800			-S1-ZiP	Lutz El 3350	49	Suit	C 104
DITY-ST-ZIP TITLE	TAMPA FL DTS	[7] DELETE	2 1 100	F	V=Q , Q1 Q	K	3 Changa	Addition
NAME	MROCZKOWSKI, MARK L.		2.2 NAM	ı£		m. 11.	<u> </u>	امد ماد،
STREET ADDRESS	100 S ASHLEY DR. #800						. D(4	THEIL
STREET MADERICAGE			2.3 \$186	EET ADORESS	1527 N. Haleman	4400	,	
CITY ST. 7IP				FET ADORESS (*) (-St-7)p	hutz, FL 33	3549	,,,,,	
	TAMPA FL	DELETE		EET ADORESS ST-ZIF .F	15)7 N. Dale Maki hutz, FL 3:	3549] Change	Addition
		☐ DELETE	2 4 CITY	- 1	hutz, FL 3	3549] Change	Addition
TITLE		☐ DELETE	2 4 CHY 3 1 THL 3 2 NAM	- 1	hutz, FL 33	3549 [] Change	Addition
TITLE NAME			2 4 CITY 3 1 1 TL 3 2 NAM 3 3 STP 3 4 CITY	HE HEET ADDRESS (-SI-ZIF	hutz, FL 3			
name Street adoress		☐ DELETE	2 4 CHY 3 1 FH 3 2 NAM 3 3 STR 3 4 CHY 4 1 TH	ME REET AODRESS	hutz, FL 3		Change	Addition
TITLE NAME STREET ADORESS CITY-ST-ZIP			2 4 CITY 3 1 T/L 3 2 NAM 3 3 STP 3 4 CITY 4 1 T/L 4 2 NAM	HE ADDRESS (-SL-ZIF)	hutz, FL 3			
TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE			2 4 CITY 3 1 FTL 3 2 NAM 3 3 STP 3 4 CITY 4 1 TTL 4 2 NAM 4 3 STP	HE ADDRESS (-SI-ZIF LE AE LE ADDRESS	hutz, FL 33			
TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	2 4 CITY 3 1 FTL 3 2 NAM 3 3 STP 3 4 CITY 4 1 TTL 4 2 NAM 4 3 STR 4 4 CITY	HE ADDRESS (-SI-ZIF LE ME HE ADDRESS (-SI-ZIF LE ME HE ADDRESS Y SI-ZIP	hutz, FL 3			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			2 4 CHY 3 1 1 TL 3 2 NAM 3 3 SIP 3 4 CHY 4 1 TH 4 2 NAM 4 3 SIP 4 4 CHY 5 1 TH	THE STANDINGSS (*-S1-ZIF LE ME EFT ADDRESS Y S1-ZIP LE	hutz, FL 3		Change	☐ Addition
STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME		☐ DELETE	2 4 CITY 3 1 T-TL 3 2 NAM 3 3 SIP 3 4 CITU 4 1 T-TL 4 2 NAM 4 3 SIR 4 4 CITY 5 1 T-TL 5 2 NAM	EEL ADDRESS (-S1-ZIF LE ME EEL ADDRESS (-S1-ZIF LE ME EEL ADDRESS (-S1-ZIP LE MS MS	hutz, FL 3		Change	☐ Addition
TITLE NAME STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS		☐ DELETE	2 4 CHY 3 1 1 11 3 2 NAM 3 3 SIP 3 4 CHY 4 1 TH 4 2 NAM 4 3 SIP 4 4 CHY 5 1 TH 5 2 NAM 5 3 SIR	HE HADDRESS Y ST-ZIP LE LE LE LE LE LE LE LE LE L	hutz, FL 3		Change	☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP CITY - ST - ZIP		☐ DELETE	2 4 CHY 3 1 1 11 3 2 NAM 3 3 SIP 3 4 CHY 4 1 TH 4 2 NAM 4 3 SIP 4 4 CHY 5 1 TH 5 2 NAM 5 3 SIR	HE HEET ADDRESS (- ST-ZIF LE ME EHT ADDRESS (- ST-ZIF LE ME HE ADDRESS (- ST-ZIP LE ME HEET ADDRESS (- ST-ZIP LE ME HEET ADDRESS (- ST-ZIP LE ME HEET ADDRESS	hutz, FL 3	[Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE		☐ DELETE	2 4 CHY 3 1 1 TH 3 2 NAM 3 3 SIP 3 4 CHY 4 1 TH 4 2 NAM 4 3 SIR 4 4 CHY 5 1 TH 5 2 NAM 5 3 SIR	HE HELL ADDRESS (-S1-ZIF) LE ME HELL ADDRESS (S1-ZIF) LE HELL ADDRESS (S1-ZIP) LE MS (MS MS M	hutz, FL 33	[Change	Addition
TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	TAMPA FL	☐ DELETE	2 4 CHY 3 1 1 11 3 2 NAM 3 3 SIP 3 4 CHY 4 1 THI 4 2 NAM 4 3 SIR 4 4 CHY 5 1 TH 5 2 NAM 5 3 SIR 5 4 CHY 6 1 TH 6 2 NAM	HE HELL ADDRESS (-S1-ZIF) LE ME HELL ADDRESS (S1-ZIF) LE HELL ADDRESS (S1-ZIP) LE MS (MS MS M	hutz, FL 33	[Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	TAMPA FL	☐ DELETE	2 4 CITY 3 1 1-11. 3 2 NAM 3 3 STP 3 4 CITY 4 1 TITE 4 2 NAM 4 3 STP 4 4 CITY 5 1 TITE 5 2 NAM 5 3 STR 5 4 CITY 6 1 TITE 6 2 NAM 6 3 STP 6 4 CITY	REEL ADDRESS (- ST - ZIP LE ME ELL ADDRESS Y - ST - ZIP LE ME ME ME ME ME ME ME ME ME	fy for the exemption stated in Section 11		Change Change Change	Addition Addition

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 emporated 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: > MOORKOL 5-29-96