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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # J26033

(7)

MANNERISMS, INC.

Principal Pla	ace of Business	Mailing Address			186 (1811 B) (111 B)
% E.G. DELUDE 103 E. LAUREN CT FERN PARK FL 32730		% E.G. DELUDE 103 E. Lauren CT Fern Park Fl. 32730			
				3. Date Incorporated or Qualified 07/28/1986	3a. Date of Last Report 05/01/1995
2. Principal 21	Place of Business	2a. Mailing Address		4. FEI Number 58-1684523	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Oity & St 23	tate	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip <b>29</b>	Country 30	8. This corporation has liability for in Florida Statutes Yes	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
81 Name					
DELUDE, E.G.			82 Street Address (P.O. Box Number is Not Acceptable)		
	E. LAUREN CT				
FER	N PARK FL 32730		83		
			84 City		85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 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 607.0505, Florida Statutes.					
SIGNATURE					
12.	Signature, typed or printed name of registere	id agmit and their applicable. (NOTE: IS AND DIRECTORS	Registered Agent signature re		DATE
TITLE	PTD	DELETE	13.	ADDITIONS/CHANGES TO OFFI	
NAME	DELUDE, JEFFREY	L.J DEECK	1.2 NAME		☐ Change ☐ Addition
STREET ADDRES			1.3 STREET ADDRESS	542 GRANBERRY	
CITY-ST-ZIP	HOUSTON TX		1.4 CHTY - ST - ZIP	HOUSTON, TEXAS	77067
TITLE	PVS	[] DELETE	2 1 Title	HOUSION, IEXAS	Change Addition
NAME	BRIGHAM, JOANNE		2 2 NAME		Change T vention
STREET ADDRES	AAT 45AA 44 111 15		2 3 STREET ADDRESS	AUD CRONRERRY	
CITY-ST-ZIP	HOUSTON TX		2 4 CITY-ST-ZIP	542 GRANBERRY HOUSTON, TEXAS	77007
TITLE		☐ DECETE	3 1 1 IILE	HOWERENT ICANS	☐ Change ☐ Addition
NAME		<del>_</del>	3.2 NAME		
STREET ADDRESS	s		3.3 STREET ADDRESS		
CITY-S1-ZIP			3 4 CITY - ST - ZIP		
TITLE		DELETE	4. 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS	s		43 STREET ADDRESS		
CITY-S1-ZIP			4.4 CITY-ST-ZIP		
TOTLE		DELETE	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS	S .		5.3 STREET ADDRESS		
CITY-ST-ZIP			5 4 CITY - ST - ZIP		
TITLE		DELE1E	€ 1 TITLE		Change Addition
NAME			6 2 NAME		
STREET ADDRESS	5		6.3 STREET ADORESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
<ol><li>14. I do here</li></ol>	eby certify that the information supp	blied with this filing is voluntarily furnish-	ed and does not qual	ify for the exemption stated in Section 119.0	7/3\(k) Florida Statutos I further

certify that the information supplied with this limit is wind is volontarily initiated and ocus not quality for the exemption stated in Section 119.07(5)(k). Florida statutes, i further certify that the information indicated on this annual report is roughternet 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

MANNERISMS IN C. 4/25/96

1-467-830-4997 Dayt nie Phone #