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 # J63833

(4)

Principal Place	A-WAY FISH LURE & HOOK se of Business T #718A ACH FL 33062	Mailing Address 2731 NE 14 ST #718A POMPANO BEACH FL 3306				
:					3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal F	Place of Business	2a. Mailing Address			03/26/1987 4. FEI Number	04/25/1996
21		26		59-2822307	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CD 75 A Marian	
22		27		5. Certificate of Status Desired	Fee Regulred	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23 Country		28		Trust Fund Contribution	Added to Fees	
			Country	•	8. This corporation has liability for	
24	25 9. Name and Address of Currer		30			Yes 🔀 No
^4		it negistered Agent	81	Name	10. Name and Address of New Re	egistered Agent
OMOELLI, DUGERTI M., ON.				TABILITIES		
	* #718		82	Street Addi	ress (P.O. Box Number is Not Accepta	ble)
	MPANO BEACH FL 33062		83			
 	III AITO DENOTITE 00002					
			84	City		FL 85 Zip Code
11. Pursuant office or r agent. La	to the provisions of Socilons 607,050 egistered agent, or both, in the State im familiar with, and accept the obliga	2 and 607.1508, Florida Statuto of Florida Such change was a ations of, Section 607.0505, Flo	es, the above uthorized by rida Statutes	e-named corp the corporat	poration submits this statement for the tion's board of directors. I hereby acce	
SIGNATURE	Joseph M CABCIII Stgnature, typed or priviled name of registered age		Jason	nm	Cuselli SR	4-9-97
12.	Signature, typed or printed name of registered ago OFFICERS ANI		Registered age	nt signature requir	red which reinstaling) ADDITIONS/CHANGES 10 OFFI	P17.1.E
TITLE	PD	DELETE	1.1 10LE		ABBITIONS/OFFANGES TO OFFI	Change Addition
NAME	CASELLI, JOSEPH M., SR.		1.2 NAME			
STREET ADDRESS	AMERICAN AND AMERICA		1.3 STREET	ADDRESS		
CITY-ST-ZIP	DOMONIO DELOU EL		1.4 CRY-S	7- 7 1P		
TITLE	SD	DELETÉ	2.1 1ITLE			Change Addition
NAME	Caselli, Helen		2.2 NAME	ľ		
STREET ADDRESS	2731 NE 14TH ST #718		2.3 STREE 1	ADDRESS		
CITY-SI-ZIP	POMPANO BEACH FL		2. 4 CITY - \$1 - 7IP			
TITLE	TD	DELETE 3.1				Change Addition
NAME	[3.2 NAMI			
STREET ADDRESS	5550 MAIN ST		3.3 STREET			
CITY-ST-ZIP TITLE	STRATFORD CT	DECETE	3.4. CITY - S	1-2IP		Change Addition
	i	€ DECERT	4.1 TITLE			Change Addition
NAME STREET ADDRESS			4. 2 NAME	ADDOLOG		
			4.3 STREET			
CITY-ST-ZIP TITLE			4.4 CHY- SI 5.1 THLE	1-418		Change Addition
NAME		**************************************	5.2 NAME)		المالية مهردد ي
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST	ł		
TITLE			6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADURESS		
CITY OF 710			E A OILV OI	מול ו		}

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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), 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 logal 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.

Joseph M. Parali:

11. 0.00

014-701-0011

FILED

Apr 14 1997 8:00am

Secretary of State