

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # K56590

(8)

1. Corporation Name
MR. BUBBLES, INC.



Principal Place of Business
1294 N. CONGRESS AVENUE
SUITE B
WEST PALM BEACH FL 33463

Mailing Address
1294 N. CONGRESS AVENUE
SUITE B
WEST PALM BEACH FL 33463

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 P.O. Box 590065

27 Suite, Apt. #, etc.

28 City & State

29 Birmingham, AL

30 Zip 31 Country

3. Date Incorporated or Qualified 01/09/1989

3a. Date of Last Report 02/28/1995

4. FEI Number 65-0102257

Applied For
Not Applicable

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

FULLWOOD, JAMES E., JR.
1294 N CONGRESS AVENUE
SUITE B
WEST PALM BCH FL 33409

10. Name and Address of New Registered Agent

81 Name Mecurio, John F.

82 Street Address (P.O. Box Number is Not Acceptable)
1920 Bell Lane

83

84 City West Palm Beach

FL

85 Zip 33409

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, of 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

V. Pres.

6/12/96

Signature of the person who is the registered agent for the corporation

Signature of the person who is the registered agent for the corporation

Date

12. OFFICERS AND DIRECTORS

TITLE D
NAME BLOUNT, W. HOUSTON
STREET ADDRESS 4117 OLD LEEDS LANE
CITY-ST-ZIP BIRMINGHAM AL ☐ DELETE

TITLE D
NAME MCNEIL, JOHN A.
STREET ADDRESS P.O. BOX 368
CITY-ST-ZIP BIRMINGHAM AL ☐ DELETE

TITLE D
NAME BLOUNT, DAVID D.
STREET ADDRESS P.O. BOX 368
CITY-ST-ZIP BIRMINGHAM AL ☐ DELETE

TITLE D
NAME FULLWOOD, JAMES E., JR.
STREET ADDRESS 18163 SE RIDGEVIEW DR.
CITY-ST-ZIP TEQUESTA FL ☒ DELETE

TITLE D
NAME MECURIO, JOHN F.
STREET ADDRESS 1920 BELL LANE
CITY-ST-ZIP W. PALM BEACH FL ☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition

2. NAME

3. STREET ADDRESS

4. CITY-ST-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-ST-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-ST-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-ST-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-ST-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY-ST-ZIP

29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY-ST-ZIP

916 Bambi Dr
Destin, Florida 32541

3505 1st Ave. South
Birmingham, AL 35222

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-07/18/96--01011--004
***200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRANK BLOUNT
MR BUBBLES, INC. 1/1/96 2058234791
PRES. NAT. CO. OF THE SOUTH

CR2E034 (12/95)