

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2000 8:00 am
Secretary of State

04-29-2000 90006 028 ***150.00

DOCUMENT # K71512

1. Entity Name

FRANKIE'S WINGS AND THINGS, INC.

Principal Place of Business

Mailing Address

C/O FRANK CALABRESE
 555 GLEN CHEEK DRIVE
 CAPE CANAVERAL FL 32920

C/O FRANK CALABRESE
 555 GLEN CHEEK DRIVE
 CAPE CANAVERAL FL 32920-4501



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2941472

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CALABRESE, FRANK
555 GLEN CHEEK DRIVE
CAPE CANAVERAL FL 32920

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election, Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
DP	CALABRESE, FRANK		
	540 PARKSIDE AVENUE		
	MERRITT ISLAND FL		
DC	CALABRESE, MARYELLEN		
	540 PARKSIDE AVENUE		
	MERRITT ISLAND FL		
DV	HALL, MARY CALABRESE		
	530 PARKSIDE AVENUE		
	MERRITT ISLAND FL		
DV	FLUGEL, BRIAN		
	1465 SYKES CREEK DRIVE		
	MERRITT ISLAND FL		
DST	FLUGEL, ELLEN		
	1465 SYKES CREEK DRIVE		
	MERRITT ISLAND FL		

13. I 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 report or supplemental 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 11 or Block 12, if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Ellen Flugel*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/00
 Date

(321) 799-4349
 Daytime Phone #

CR2E034 (9/99)