FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # K73340 POMPANO JOE'S, INC. Principal Place of Business Mailing Address 5150 W. COPANS RD 5150 W. COPANS RD **SUITE 1218 SUITE 1218** MARGATE FL 33063 MARGATE FL 33063 3. Date Incorporated or Qualified 3a. Date of Last Report 03/16/1989 01/18/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Y312 N. FEDERAL HWY 26 7800 WOAKLAMD PIRK 65-0106737 Not Applicable Suite, Apt. #, etc. // Suite. Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired X 27 BLD6 Fee Required FT LAUDEROALE 6. Election Campaign Financing \$5.00 May Be 23 SUNRISE PL Trust Fund Contribution Added to Fees Zip 33351 Country 8. This corporation has liability for intangible tax under s. 199.032. ΰS 24 Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name EJEAN LAPIERRE FICARELLI, RICHARD 82 P.O. Box Number is Not Acceptable) 5150 W. COPANS RD OAKLAMO BLVO **SUITE 1218** MARGATE FL 33063 City Pursuant to the provisions of Sec or registered agent, or both, in the ions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office state of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am along our corporation is board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept to SIGNATURE REJEAN LAPICARE (NOTE Registered Agent signature int and title if applicable CR2E034 (12/95) 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TILLE DELETE 1.11000 Change Change ■ Addition FICARELLI, RICHARD NAME 1.2 NAME 4312 N FEDERAL HWY 3031 NE 41 ST STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 33308 CHY-ST-ZIF 1.4 CITY - ST - ZIP FT LAVOBADALE 33308 THI: F DELETE 2 1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 24 CITY - ST - ZIP TIFLE DELETÉ 3 1 TITLE Change ■ Addition 32 NAME STEEL ADDRESS 3.3 STREET ADDRESS CHY ST-71P 3 4 CITY-ST-ZIP THILE DELETE 4.1 TITLE Change ☐ Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS C:1Y ST-7/P 4.4 CHY-S1-ZIP 1:116 DELETE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS **5 3 STREET ADDRESS** Cily-St-ZiP 5 4 CITY - ST - ZIP 1111 DELETE 6. 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS City - 51 - 7if 6.4 CHTY - ST - ZIP 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 certify that I am an officer or disorder of the corporation or the receipt of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

RICHARD FICARELLI

SIGNATURE: