

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Apr 07 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # L50025 (0)
1. Corporation Name
PAUL MICHAEL ENTERPRISES INC.

Principal Place of Business
PAUL MICHAEL ENTERPRISES INC.
BOX 130083
TAMPA FL 33681
US

Mailing Address
P.O. BOX 130083
TAMPA FL 33682
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/15/1990

4. FEI Number

59-2817866

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MANCINELLI, PAUL M.
1745 MULBERRY DR.
TAMPA FL 33604

10. Name and Address of New Registered Agent

81 Name Paul M Mancinelli
82 Street Address (P.O. Box Number is Not Acceptable)
2009 Mulberry Dr. Apt. B
83
84 City Tampa FL 85 Zip Code 33604

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
	MANCINELLI, PAUL	6002 SWITZER	TAMPA FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	1.5 TITLE	1.6 NAME	1.7 STREET ADDRESS	1.8 CITY - ST - ZIP	1.9 TITLE	1.10 NAME	1.11 STREET ADDRESS	1.12 CITY - ST - ZIP	1.13 TITLE	1.14 NAME	1.15 STREET ADDRESS	1.16 CITY - ST - ZIP	1.17 TITLE	1.18 NAME	1.19 STREET ADDRESS	1.20 CITY - ST - ZIP	Change	Addition
	Paul M Mancinelli	2009 Mulberry Dr.	Tampa, FL																	<input type="checkbox"/>	<input type="checkbox"/>
																				<input type="checkbox"/>	<input type="checkbox"/>
																				<input type="checkbox"/>	<input type="checkbox"/>
																				<input type="checkbox"/>	<input type="checkbox"/>
																				<input type="checkbox"/>	<input type="checkbox"/>
																				<input type="checkbox"/>	<input type="checkbox"/>
																				<input type="checkbox"/>	<input type="checkbox"/>
																				<input type="checkbox"/>	<input type="checkbox"/>
																				<input type="checkbox"/>	<input type="checkbox"/>
																				<input type="checkbox"/>	<input type="checkbox"/>

14. 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 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 in an attachment with an address.

SIGNATURE:

3-30-98

813-930-9790

CR2E034 (10/97)