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 # L94189

(2)

1. Corporation	FRY CHOO-CHOO, INC.	•	,						
Principal Place 20241 NE 1071- N. MIAMI BEAC	1 COURT	20241 NE 10T	Mailing Address 20241 NE 10TH COURT N. MIAMI BEACH FL 33179-2514				I BIBII BAHA T	<u> </u>	JHNA KAN
						3. Date Incorporated or Qualified			eport
2. Principal Pi	lace of Business	2a. Mailing A	2a. Mailing Address			4. FEI Number		Ap	plied For
21	В	26				65-0222280			t Applicable
Suite, Apt -	#, OTC	-	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A	
City & State	e		City & State			6. Election Campaign Financing \$5.00 May Be			
23		28	28			Trust Fund Contribution Added to Fees			
Zip	Country	Z-p	, 		y		8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes		
24	25 9. Name and Address of Curr	29 ent Registered Age		30		Florida Statutes 10. Name and Address of New Re			
.IAC	OBSON, STEWART ESQ.	ent neglistered Age		81	Name	IG. Harris and Address of How It	A SISTERIOR I	-yom	
	SOUTH FEDERAL HIGHWAY			82	Stroot A	ddress (P.O. Box Number is Not Accepta	blo)		
	LYWOOD FL 33020				Sirect Ai	ess (r.o. Box number is not Acceptable)			
				83					
				84	City	17 manus	FL	85 Zip (Code
SIGNATURE	to the provisions of Sections 607.0 egistered agent, or both, in the Six militarnillar with and accept the ob-					orporation submits this statement for the ration's board of directors. I hereby acce	purpose or pt the app	changing its	s registered registered
12.	· · · · · · · · · · · · · · · · · · ·	ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	S IN 12
TITLE	D		DELETE	1.1 TITLE				Change	Addition
NAME	ISRAEL, ROBERT			1.2 NAME	i				
STREET ADORESS	20241 NE 10 COURT N. MIAMI BEACH FL			1	1 ADDRESS				
CITY-ST-ZIP TITLE	D D		DELETE	1.4 City - 2.1 Title	ST-ZIP			Change	Addition
NAME	ISRAEL, KATHLEEN	_	,	2.2 NAME					and the state of
STREET ADDRESS	20241 NE 10 COURT			1	T ADDRESS				
CHY-ST ZIP	n. Miami Beach Fl			2 4 CITY-	-ST-ZIP				
TIFLE			DELETE	3 1 TITLE				Change	Addition
NAME				3 2 NAME	į				
STHEET ADDRESS					TADDRESS				i
C-TY-ST-ZIP TIFLE			DELETE	34 CITY- 41 TITLE				Change	Addition
NAME		_	, DELL'IL	4 2 NAME	1			og	
STREET ADDRESS					T ADDRESS				
CITY - ST - ZIP				4.4 CITY-					
TITLE	TANKAH/		DELETE	51 TITLE			·	Change	Addition
NAME				£ 2 NAME					
STREET ADDRESS				5 3 STREE	T ADDRESS				
CITY - ST - ZIP			***	5.4 CITY	ST-ZIP				
TITLE			DELETE	6 1 TITLE	-			Change	☐ Addition
NAME				6.2 NAME					
STHEET ADDRESS				6.3 STREE	1 ADDRESS				

14. If do hereby certify that the information supplied with this fling 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 or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Sarail

305-651-210P

FILED

Jan 17 1997 8:00am

Secretary of State

PROTE #

2F034 (9/96)