

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

102

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # M71674 (9)
1. Corporation Name
INNOVATIVE MARKETING IDEAS OF FLORIDA, INC.

Principal Place of Business
712 ARGYLE PLACE
P.O. BOX 280331
TEMPLE TERRACE FL 33687

Mailing Address
712 ARGYLE PLACE
P.O. BOX 280331
TEMPLE TERRACE FL 33687

FILED
97 AUG -5 AM 9:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/04/1988		3a. Date of Last Report 07/01/1996	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 59-2835452		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country		29 Country		30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

CIACCIO, GASPAR
712 ARGYLE PLACE
TEMPLE TERRACE FL 33617

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CIACCIO, JOSEPH H.	1.2 NAME	000002262440--7
STREET ADDRESS	3127 W SLIGH AVE., #201B	1.3 STREET ADDRESS	-08/08/97--01142--007
CITY-ST-ZIP	TAMPA FL	1.4 CITY-ST-ZIP	****165.00 ****165.00
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CIACCIO, STEVEN P.	2.2 NAME	
STREET ADDRESS	8448 N. 58TH ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	2.4 CITY-ST-ZIP	
TITLE	STD	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CIACCIO, GASPAR	3.2 NAME	
STREET ADDRESS	8448 N 58TH ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	TEMPLE TERRACE FL	3.4 CITY-ST-ZIP	
TITLE	SA	4.1 TITLE	SA PRES/DIRECTOR
NAME		4.2 NAME	JAMES B. CIACCIO
STREET ADDRESS		4.3 STREET ADDRESS	8448 N. 58TH ST.
CITY-ST-ZIP		4.4 CITY-ST-ZIP	TEMPLE TERRACE FL. 33617
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

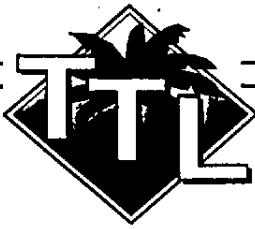
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall 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, or in an attachment with an address.

SIGNATURE:

SEVEN MONTHS EXPIRED

7/20/97

CR2E034 (4/97)



BAR & GRILLE

202
SPECIALTY
WINE & LIQUOR
SHOPPE

July 28, 1997

Please find the enclosed copies of my Annual Report for 1997: Document # H55370 and Document # M71674.

I did not receive my first copy of the above listed items. Is there any possibility that you would waive the late fee, due to the fact that I did not receive that first notice? Please check my past filings for prompt payments.

Thank you in advance, and enclosed please find my checks for \$ 165.00 for each corporation. If you have any questions, please call me.

Sincerely,

A handwritten signature in cursive script that reads 'Jimmy Ciaccio'.
Jimmy Ciaccio

j.j.w.