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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M92948

MR. FRANK'S PROPERTIES, INC.

(2)

FILED Mar 24 1998 8:00am Secretary of State



. <u>-</u>						BIAN BIAN BIBN BIBN IBN	
Principal Place of Business Mailing Address C/O D. F. BEOVICH, JR. C/O D. F. BEOVICH, JR.						SIBIL BISIL BIRIL BIRIL ISBN	
2100 NORTH ESCAMBIA AVENUE PENSACOLA FL 32503		2100 NORTH ESCAMBIA AVENUE PENSACOLA FL 32503			DO NOT WRITE IN THIS	DO NOT MOTE IN THIS SPACE	
		PERISHCOLA PL 92505			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
					07/26/1988		
2. Principal P	ace of Business	2a. Mailing Address			4. FEI Number	Applied For	
21		26		59-2899562	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
22		27			5. Certificate of Status Desired	Fee Required	
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Count	ry	8. This corporation owes or has paid the cur		
24	25 9. Name and Address of Curren		30		Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No	
DE/		ii negistereti Agerit		1 Name		Agent	
BEOVICH, D. F., JR. 2100 NORTH ESCAMBIA AVE.			Ĺ				
	NSACOLA FL 32503		8	2 Street	Address (P.O. Box Number is Not Acceptable)		
PENSACOLA PL 32303			8	3			
			Ľ				
			8	4 City	FL	85 Zip Code	
11. Pursuant i	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the abo	ve-named	corporation submits this statement for the purpose of poration's board of directors. I hereby accept the app	changing its registered	
office or re agent. La	egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was a ations of Section 607 0505. Flo	uthorized I	by the corp	poration's board of directors. I hereby accept the app	ointment as registered	
SIGNATURE			· · · · · · · · · · · · · · · · · · ·				
SIGNATORE	Signature typed or printed name of registered age	int and title if applicable {NOTE	Registered A	gent signature	p required when reinstating) DATE		
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	D	☐ DELETE	1.1 TITLE			☐ Change ☐ Addition	
NAME	BEOVICH, D. F., JR.		1.2 NAMI	E			
STREET ADDRESS	2100 N. ESCAMBIA AVE.		1.3 STRE	ET ADDRESS			
CITY-ST-ZIP			1.4 CITY-				
TITLE	D CHANNON MADY IANIC	☐ DELETE	2.1 TITLE			☐ Change ☐ Addition	
NAME	SHANNON, MARY JANIS 1909 E. BLOUNT ST		2.2 NAMI				
STREET ADDRESS	PENSACOLA FL			ET ADDRESS			
CiTY-ST-ZIP	PENSACOLA PL	DELETE	2. 4 CITY			Flator Flator	
TITLE		☐ otteit	3.1 TITLE			Change Addition	
NAME CIDEET ADODESC			3.2 NAM			1	
STREET ADORESS				ET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4. CITY 4.1 TITLE			Change Addition	
NAME		vection	4. 2 NAM]		C comito Li vaningii	
STREET ADDRESS			1	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY			}	
TITLE		☐ DELETE	5.1 TITLE			Change Addition	
NAME			5.2 NAME				
STREET ADDRESS				ET ADORESS			
CITY-ST-ZIP			5.4 CITY -				
TITLE		DELETE	6.1 TITLE			☐ Change ☐ Addition	
NAME		•	6.2 NAME	:		_ ,	
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			6.4 CITY				

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, or on an attachment with an address.

2/12/24 250-424/6627