FILE	NOW: FILING FEE	AFTER MAY 1ST I	S \$550.00	F]	ILED
			RTMENT OF STATE	Anr 01 1	998 8:00am
ANNUAL REPORT			<b>B. Mortham</b> ary of State		
1998 DIVISION OF C		CORPORATIONS	Secreta	ary of State	
1. Corporatio	MENT # M962! & FAMILY ENTERPRISES				
Principal Place of Business Mailing Address					iil albii albii bibii bibii bibii bibii ibbi
10881 GULF BLVD. C/O BROIDA & MCKINNE TREASURE ISLAND FL 33706 605 75TH AVE.			EY. PA		
		ST. PETERSBURG BEAC US	H FL 33706	DO NOT WRITE IN THIS SPACE  3, Date Incorporated or Qualified	
				08/29/1988	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number 59-2920660	Applied For Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Stat	6	City & State		6. Election Campaign Financing	Fee Required \$5.00 May Be
23		28	I	Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip 29	Country 30	This corporation owes or has particular personal Property Tax due June	
	<ol> <li>Name and Address of Current</li> <li>OIDA &amp; MCKINNEY, PA</li> </ol>	ent Registered Agent	61 Name	10. Name and Address of New Re	gistered Agent
60	D S. KEITH MCKINNEY, JR. 5 75TH AVE. . PETERSBURG BEACH FL 337	706	62 Street Add 63 84 City	dress (P.O. Box Number is Not Accepta	FL 85 Zip Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the Sta m familiar with, and accept the obli	502 and 607.1508, Florida Statut le of Florida. Such change was gations of, Section 607.0505, Fl	tes, the above-named co authorized by the corpora orida Statutes.	rporation submits this statement for the ation's board of directors. I hereby acce	ourpose of changing its registered pt the appointment as registered
SIGNATURE	Signature, typed or printed minie of registered a	gent and title it applicable (NOI	E: Registered Agent signature requ	uired when reinstating)	DATE
12.	<del></del>	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	
TITLE NAME	DO Mineo, antonino	L DELETE	1.1 TITLE 1.2 NAME		☐ Change ☐ Addition
STREET ADDRESS	7133 37TH AVENUE, NORT	Н	1.3 STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL		1.4 CITY-ST-ZIP		
TITLE NAME	DO Mineo, Giuseppa i	☐ DELETE	2.1 TITLE		Change Addition
STREET ADDRESS	7133 37TH AVENUE, NORTH	Н	2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL		2.4 CITY-ST-ZIP		
TITLE	0	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS	MINEO, STEFANO A. 7133 37TH AVENUE, NORTI	ㅂ	3.2 NAME		
City-St-ZiP	ST. PETERSBURG FL	<b>! !</b>	3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		
TITLE	0	DELETE	4.1 TITLE		Change Addition
NAME	SOTO, ELISABETH C.		4. 2 NAME		
STREET ADDRESS	3911 76TH WAY, NORTH		4.3 STREET ADDRESS		
CITY-ST-Z#P TITLE	ST. PETERSBURG FL	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		onungo nooliion
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		····	5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		

14. Thereby 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 charged, or on an attachment with an address.

SIGNATURE:

6.3 STREET ADDRESS

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STREET ADDRESS