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 # P93000037776 (0)

AA & E ENTERPRISES, INC.

Principal Piace 3731 SW 47TH #401 DAVIE FL 3331	AVE	Mailing Address 3731 SW 47TH AVE #401 DAVIE FL 33314-2800							
ÜS		U\$			i '		te of Last Report 23/1996		
 -	lace of Business	2a. Mailing Address						pplied For	
21 Cuito Ant	# a4a	26			· ·				ot Applicable
Suite, Apt.	#, BtC.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired	
City & State	e	City & State				6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution			to Fees
Zip	Country	Ζφ	Coun	try		8. This corporation has liability fo			s. 199.032,
24	25	29	30				X Yes [
	9, Name and Address of Curren	I Registered Agent		31	Name	10. Name and Address of New F	legistered /	Agent	
	ICELLO, ANTHONY G			"	Marine				
3/31 #40	1 SW 47TH AVE		E	12	Street Addr	ess (P.O. Box Number is Not Accepta	able)		
	1E FL 33314		Ē	33					
DA	12 12 40014		-2		-				
			٤	34	City		FL	85 Zip	Code
agent. La: SiGNATURE	egistered agent, or both, in the State im familiar with, and accept the obligations of the stendard of the ste	ations of, Section 607.0505, F	lorida Statu	tes.		ion's board of directors. Thereby aco	ept the app	ointment as	rogistered
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFF	ICERS AND		
TITLE	D ANTHONY O	∐ DELETE	1.1 THL					Change	Addition
NAME	PORCELLO, ANTHONY G 3731 SW 47TH AV		1.2 NAM						
STREET ADDRESS	DAVIE FL				ADDRESS				
CITY-ST-ZIP TITLE	D	☐ DELETE	1.4 CITY 2.1 TITL		- 217			Change	Addition
NAME	OLDAKER, ALFRED E V	_	2 2 NAM						
STREET ADDRESS	3731 SW 47TH AVE		2.3 S1R	EET A	ADDRESS				
CITY-ST-ZIP	DAVIE FL		2. 4 CIT	Y - SI	I - 7IP				
TITLE		☐ DELETE	31 TITL				_	Change	Addition
NAME			3.2 NAV	-					
STREET ADORESS					ADDRESS				
CITY-ST-ZIP TITLE		DELETE	3.4. CIT		1 - ZIP			Change	Addition
NAME			4 2 NAN						nadicion
STREET ADDRESS			1		ADDRESS				
CITY-ST-ZIP			4.4 CITY						
TITLE		DELETE	5.1 71711	E				Change	Addition
NAME			5.2 NAM	É					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		Donore	5.4 CITY		- 7(P			<u> </u>	A Juni
TITLE	·	☐ DELETE	6.1 THU			•		Change	Addition
NAME STREET ADDRESS			6.2 NAM		thouses				
STREET ADDRESS			6.3 STRE	: E I F	ADORESS				

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 eath; 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 inchanged on an attachment with an address.

SIGNATURE:

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FILED

May 13 1997 8:00am

Secretary of State