## 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 # P93000064653 (7)

FLORIDINO'S INTERNATIONAL, INC.

## **FILED** May 18 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									r roditent jim idiga kitit danis editi banis belik dibib bili dibib bili indi
3560 CYPRESS GARDENS ROAD WINTER HAVEN FL 33884					3560 CYPRESS GARDENS ROAD WINTER HAVEN FL 33884				DO NOT WRITE IN THIS SPACE
									3. Date Incorporated or Qualified
									09/15/1993
	2. Principal Place of Business			28	2a. Mailing Address				4. FEI Number Applied For
21	21			26	record and a record of the second and the second an				<b>59-3210092</b> Not Applicable
22	Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired
==-	City & State				City & State				6. Election Campaign Financing \$5.00 May Be
23	23				28				Trust Fund Contribution Added to Fees
	Zip Country				Zip Country				8. This corporation owes or has paid the current year Intangible
24		25 29 30			30			Personal Property Tax due June 30.  Yes No	
g. Name and Address of Current			ent Regis	egistered Agent				10. Name and Address of New Registered Agent	
	' FLO	PRI <b>D</b> INO, M	AICHAEL				81	Name	· · · · · · · · · · · · · · · · · · ·
3560 CYPRESS GARDENS RD.							82	Street Ad	ddress (P.O. Box Number is Not Acceptable)
WINTER HAVEN FL 33884						83			
							84	City	FL 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 registerer									
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 period naive of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE									
Signature, typed or profed name of registered agent and title  12. OFFICERS AND DIRE								int signature rec	applied when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
Till		D	OFFICENSY	IND OINE	DELETE	13.	TI F		Additions/Changes to Officers and Directors in 12  Change Addition
	ME	-	NO MIKE			1.2 NA			
	AME FLORIDINO, MIKE  3560 CYPRESS GARDENS RD.			RN				ADDRESS	
	TY-ST-ZIP		HAVEN FL 33884					T-ZIP	
	LE	771111	111111111111111111111111111111111111111		DELETE	2.1 70		<del>' '"</del>	Change Addition
N.A	JME .					2.2 N/			
ST	REET ADORESS					2.3 \$1	REFT	ADDRESS	
	TY-ST-ZIP					2. 4 C		- 1	
TIT					DELETE	3.1 Tr			☐ Change ☐ Addition
NA	IME					3.2 NA	ME		
ST	REET ADDRESS					3.3 ST	REET	ADDRESS	
CI.	TY-ST-ZIP					3.4. C	ITY-S	ST - ZIP	
TIT	LE				☐ DELETE	4.1 TI	LE		☐ Change ☐ Addition
NA	ME					4.2 N	AME		
ST	REET ADDRESS					4.3 ST	REET	ADDRESS	
ÇI	TY-ST-ZIP					4.4 CI	TY-S	T-ZIP	
TIT	'LE				DELETE	5.1 TI	LE		☐ Change ☐ Addition
N.A	ME					5.2 NA	ME		
ST	reet address					5.3 ST	REET	ADDRESS	
cn	ry-st-zip					5.4 CI	TY-S	T - ZIP	
TIT	LE				DELETE	6.1 10	TLE	}	Change Addition
NA	ME					6.2 NA	ME		
ST	reet address					6.3 ST	REET	ADDRESS	
CIT	ry-st-zip	<del></del>				6 4 CI	TY-S	1 - ZIP	

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 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 coelever or trustee compowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or pn an attachment with an address.