FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

Mailing Address

32 N.W. 45 AVENUE

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

Principal Place of Business

32 N.W. 45 AVENUE

P93000076953 (7) DOCUMENT # 1. Corporation Name

MANUFACTURERS UNLIMITED, INC.

DEERFIELD BCH. FL

VEREEN, JOAN W

DEERFIELD BCH. FL

32 NW 45 AVE.

DEERFIELD BEACH FL 33442	DEERFIELD BEACH FL	. 33442		
			3. Date incorporated or Qualified 11/01/1993	3a. Date of Last Report 05/01/1995
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
1	26		65-0444160	Not Applicable
Suite, Apl. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 4 25	Zip 29	Gountry 30	8. This corporation has liability for a Florida Statutes Yes	¥
	of Current Registered Agent		10. Name and Address of New R	egistered Agent
		81 Name		
VEREEN, ORVILLE P 32 N.W. 45TH AVENUE		82 Street Add	Address (P.O. Box Number is Not Acceptable)	
DEERFIELD BEACH FL 33442		83		
		84 City		FL 85 Zip Code
familiar with, and accept the obligation	late of Florida. Such change was authori ins of, Section 607.0505, Florida Statule	ized by the corporation's bo es.	ard of directors. I hereby accept the appo	pose of changing its registered offic bintment as registered agent. I am
	Signature, typod or protectionally of registered agent and tits. I socilicate (NC OFFICERS AND DIRECTORS		ogistered Agrint signature required when reinstating: 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	DELETE	1 1 11116	713511010.01741023.10.01	☐ Change ☐ Addition
NAME VEREEN, ORVILLE F		1.2 NAME		
STREET ADDRESS 32 NW 45 AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP DEERFIELD BCH. F	1	1.4 CITY - ST-ZIP		
TITLE VST	T DELETE	2. 1 T(1LF		Change Addition
NAME VEREEN, JOAN W		2 2 NAME		
STREET ADDRESS 32 NW 45TH AVE.		2.3 STREET ADDRESS		
CITY-ST-ZIP DEERFIELD BCH. F	L	2 4 CITY - ST - ZIP		
TITLE D	DELETE	3. 1 TITLE		Change Addition
NAME VEREEN, ORVILLE I	P	32 NAME		
STREET ADDRESS 32 NW 45 AVE.		3.3 STREET ADDRESS		

6.4 C(1Y - S1 - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

34 CITY - ST - ZIP

4.3 STREET ADORESS

4. 1 TITLE

4.2 NAME

5. 1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6 1 111LE

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

CITY-ST-7IP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE NAME

DELETE

DELETE

DELETE

Addition

Addition

Addition

☐ Change

☐ Change

___ Change