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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 20 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	MENT # P9300( SONS ENTERPRISES, INC.	0080378 (1)	)		
	TOTAL BITTER THE EDY MICE				<u> </u>
Principal Plac	ce of Business	Mailing Address			<u> </u>
1960 AUGUSTA TERR.		P. O. BOX 770577			
CORAL SPGS. FL 33071		CORAL SPGS. FL 386/1-0577			
US		US	•	DO NOT WRITE IN T	HIS SPACE
				3. Date Incorporated or Qualified	
2. Principal P	Place of Business	2a. Mailing Address		11/22/1993 4. FEI Number	Applied For
21		26		65-0454569	Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.			60.75
22		27		<b>5.</b> Certificate of Status Desired	Fee Required
City & Stat	io	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	29 33017	Country 30	This corporation owes or has paid the Personal Property Tax due June 30.	e current year Intangible
	g. Name and Address of Curren	l Registered Agent	1	10. Name and Address of New Registe	
MA	MONE, GRACE		81 Name		
1960 AUGUSTA TERRACE			82 Street Ac	idress (P.O. Box Number is Not Acceptable)	
CO	PRAL SPRINGS FL 33071		83		
			84 City	1	FL 85 Zip Code
11. Pursuant office or r agent. La	to the provisions of Sections 607.0503 egistered agent, or both, in the State im familiar with, and accept the obliga	2 and 607.1508, Florida Statu of Florida Such change was itions of, Section 607.0505, F	ites, the above rianied co authorized by the corpo- lorida Statutes.	orporation submits this statement for the purpor ration's board of directors. I hereby accept the	
SIGNATURE	Signaliare, typed or printed name of registered ages	if and title if applicable (6s)	H. Registered Ageot signature ha	quired when reinstailing) ON	di
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TOLE	PVTS	☐ DELETE	1 1 10 LE		☐ Change ☐ Addition
NAME	MAMONE, GRACE		12 NAME		;
STREET ADDRESS	1960 AUGUSTA TERR. CORAL SPGS. FL		1.3 STREET ADDRESS		ļ
CITY-ST-ZIP TITLE	PVTS	DFLETE	1.4 DTY-SI-ZIP 2.1 TILLE		Change Addition
NAME	MAMONE, GRACE	- Dittile	2.2 NAME		C Change C Addition
STREET ADDRESS	1960 AUGUSTA TERR.		2.3 STREET ADDRESS		
CITY-ST-7IP	CORAL SPGS. FL		2. 4 CITY - S1 - ZII'		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME	·		3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		There are	3 4. C(TY - ST - 7)P		
TITLE		DELETE	4.1 BILF		Change
NAME Street address			4. 2 NAME		
CITY-ST-74P			4.3 STREEL ADDRESS 4.4 CITY-ST-7IP		
TITLE		☐ DELEVE	5.1 THIF		Change Addition
NAME		<b>—</b>	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-2IP			5.4 CITY - \$1 - 7IP		
TITLE		DELFTE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-S1-ZIP			6 4 CITY - S1 - ZIP		

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 signalure 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 frusted 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 out in attachment with an address. 1/0/97