

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

**APPROVED
AND
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95 MAY -1 PH 4: 10

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**200001532522
-07/07/95--01061--010
***200.00 ***200.00**

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94 0000028919
1. Corporation Name
FRANK BROTHERS, INC.

Principal Place of Business Mailing Address
6470 S.W. 41 street Miami Florida 33155 **9090 South River Drive Medley Florida 33166**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

3. Date Incorporated or Qualified	3a. Date of Last Report
04/14/1994	
4. FEI Number	Applied For
65-0483816	Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent
**Francisco Guillemi, Jr.
6470 S.W. 41 Street
Miami, Florida 33155**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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 registered 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 *Francisco Guillemi, Jr.* **-FRANCISCO GUILLEMI, JR.** DATE **6/20/1995**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STREET ADDRESS	12 NAME	
STREET ADDRESS	CITY - ST - ZIP	13 STREET ADDRESS	
CITY - ST - ZIP		14 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STREET ADDRESS	22 NAME	
STREET ADDRESS	CITY - ST - ZIP	23 STREET ADDRESS	
CITY - ST - ZIP		24 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STREET ADDRESS	32 NAME	
STREET ADDRESS	CITY - ST - ZIP	33 STREET ADDRESS	
CITY - ST - ZIP		34 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STREET ADDRESS	42 NAME	
STREET ADDRESS	CITY - ST - ZIP	43 STREET ADDRESS	
CITY - ST - ZIP		44 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STREET ADDRESS	52 NAME	
STREET ADDRESS	CITY - ST - ZIP	53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STREET ADDRESS	62 NAME	
STREET ADDRESS	CITY - ST - ZIP	63 STREET ADDRESS	
CITY - ST - ZIP		64 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

REMITTED BY MAY 1

14. I do hereby certify that the information furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated in 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 corporation; that I am authorized 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 to this report.

SIGNATURE: *Francisco Guillemi, Jr.* **FRANCISCO GUILLEMI, JR.** DATE **6/20/95** TELEPHONE # **362-9139**