## **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 # P9400057159 (3)

MORE OF EVERYTHING NICE, INC.

Principal Place of Business

Mailing Address

1616 EAST MAIN STREET PAHOKEE FL 33476

1616 EAST MAIN STREET PAHOKEE FL 33476-1110

## **FILED** Apr 16 1997 8:00am Secretary of State



					3. Date Incorporated or Qualified 08/01/1994	05/01/1996			
<del></del>	Place of Business	2a. Mailing Address				4. FEI Number			Applied For
21 Suito Ant	# ato	Suite, Apt. #, etc.						Not Applicat	
Suite, Apt.	₩, ΘIC.	27			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & Stat	6	City & State			······	6. Election Campaign Financing		\$5.0	00 May Be
23		28			Trust Fund Contribution Added to Fees				
Zip	Country	Zip			(	8. This corporation has liability for it			r s. 199.032,
25 29 30 30 9. Name and Address of Current Registered Agent						Florida Statutes Yes X No  10. Name and Address of New Registered Agent			
		negleteled Agent		81	Name	10. Name and Address of New Neg	11010100	Agoill	
	AMS, FRANCES E 16 EAST MAIN STREET		ļ	20 0					
	HOKEE FL 33476		82 Street Addr		Street Addre	ess (P.O. Box Number is Not Acceptab	le)		
	TORDE I E 00410		ľ	83					
ş				84	City			05 7	in Codo
				04	City		FL	85 Z	ip Code
office or agent. I a	to the provisions of sections 607/0502/ registered agent, or both, in the State am familiar with, and accept the obligation Signature, typed or printed name of registered agents.	of Florida. Such change was tions of, Section 607.0505, Fl	authorized orida Stati	d by utes	y the corporati s.	oration submits this statement for the p ion's board of directors. I hereby accept	t the app	ointment	as registere
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECT	ORS IN 12
TITLE	PD DELETE		1,1 70	1.1 TO LE				Chang	ge 🔲 Addi
NAME			1,2 NA	1.2 NAME					
STREET ADDRESS	147 BACOM POINT ROAD			1.3 STREET ADDRESS					
CITY-ST-ZIP	PAHOKEE FL 33476	Doriete		1.4 City-ST-ZIP				Chan	oe 🗌 Addi
TITLE	HÖRNER, BETH A	☐ DELETE		2.1 TITLE 2.2 NAME				Chang	ויים אנים
STREET ADDRESS	1616 EAST MAIN STREET		2.3 STREET ADDRESS		ADOBECC				
CITY-ST-ZIP	A446477 PL A4474		2.4 CI						
TITLE	S	DELETE	3.1 TITLE					Chang	je 🔲 Addi
NAME	ADAMS, JAYNA K		3.2 NAME						
STREET ADDRESS	1616 EAST MAIN STREET		3.3 ST	3.3 STREET ADDRESS					
ÇITY-ST-ZIP	PAHOKEE FL 33476		3.4 CI	3.4 CITY-ST-ZIP					
TITLE	T	DELETE	4.1 T(T					Chang	je Addi
ńame	LOHMANN, ANGEE A		4. 2 N/						
STREET ADDRESS	1109 NE 2ND STREET				ADDRESS				
CITY-ST-ZIP TITLE	BELLE GLADE FL 33430	DELETE	4.4 CIT 5.1 TIT		51-ZIP			Chanc	e 🔲 Addi
NAME	ADAMS, FRANCES E	occut	5.2 NA						,- <u> </u>
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP	PAHOKEE FL 33476		5.4 CIT						
TITLE		☐ DELETE	6.1 TITLE			<del> </del>		Chang	je 🔲 Addi
NAME			6.2 NA	ME					
STREET ADDRESS			6.3 \$11	REE1	ADDRESS				
CITY-ST-ZIP			6.4 CIT						
informatio	on indicated on this annual report or si officer or director of the corporation or in Block 12 or Block 13 if changed, or	inglemental annual report is t	rive and a	COL	irate and that	i in Section 119.07(3)(i), Florida Statutes my signature shall have the same legal t as required by Chapter 607, Florida S	effect as	: if made	under oath::