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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

P94000058253 (3)

DOCUMENT # PS

ACCENT ENTERPRISES, INC.



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ncipal Place of B	Business	Mailing Address						
1433 S. POWERLINE ROAD POMPANO BEACH FL 33069 POMPANO BEACH FL 33069								
POMPANO BE	ACH FL 33069	POMICANO DENOTE			3. Date Incorporated or Qualified 08/08/1994	3a. Date of 07	Last Re 7/18/1	995
D	al Dunings	2a. Mailing Address			4, FEI Number			Applied For
Principal Place of Business		26		00 00		Not Applicable		
Suite, Apt. #, e	etc.	Suite, Apt. #, etc.			5. Contificate of Status Desired			Additional Required
Canal F Ann - 1 -	. <u></u>	27						<del>'</del>
City & Stale		City & State		6. Election Campaign Financing Trust Fund Contribution  \$5.00 May B Added to Fees			_	
		28	Countr	· · · · · · · · · · · · · · · · · · ·	This corporation has liability for it	ntangible tax		
Zip	Country	Ζφ <b>29</b>	30	у	Florida Statutes X Yes	☐ No		
	25 9. Name and Address of Currer				10. Name and Address of New R	egistered Ag	jent	
	9. Hattle and Addition		81	Name				
LIT, NEA	.1		82	Street Addr	ess (P.O. Box Number is Not Acceptab	le)		
1433 SO	OUTH POWERLINE ROAD							
POMPAN	NO BEACH FL 33069		83	3				
, •,			8	4 City			85 Z	ip Code
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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)ki, Florida Statutes Florida Statutes Florida 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 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 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 changes, or or an attachment with an address.

SIGNATURE:

INATURE AND THEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/96 9511

CR2E034 (12/95)