

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000059498 (3)

1. Corporation Name

FLORIDA FUN FACTORY, INC.



Principal Place of Business

4275 34TH STREET SOUTH  
SUITE 295  
ST. PETERSBURG FL 33711  
US

Mailing Address

4275 34TH STREET SOUTH  
SUITE 295  
ST. PETERSBURG FL 33711  
US

3. Date Incorporated or Qualified  
08/10/1994

3a. Date of Last Report  
05/22/1995

2. Principal Place of Business

21 4905-34th Street So.

2a. Mailing Address

26 4905-34th Street So.

4. FEI Number  
65-0524740

Applied For  
Not Applicable

Suite, Apt. #, etc.

22 Suite 295

Suite, Apt. #, etc.

27 Suite 295

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

City & State

23 St. Petersburg, Fl.

City & State

28 St. Petersburg, Fl.

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

Zip

24 33711

Country

25 Pinellas

Zip

29 33711

Country

30 Pinellas

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MATHENA, MONA  
3502 CASA BLANCA AVENUE  
ST. PETERSBURG BEACH FL 33706

81 Name

MONA MATHENA

82 Street Address (P.O. Box Number is Not Acceptable)

4495-31st Ave No.

83

84 City

St. Petersburg

FL

85 Zip Code

33713

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

*Mona Mathena*  
Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating.)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE  
NAME MATHENA, MONA  
STREET ADDRESS 3502 CASA BLANCA AVENUE  
CITY-ST-ZIP ST. PETERSBURG BEACH FL 33706

1.1 TITLE President ☒ Change ☐ Addition  
1.2 NAME MONA MATHENA  
1.3 STREET ADDRESS 4495-31st Ave. No.  
1.4 CITY-ST-ZIP St. Petersburg, Fl. 33713

TITLE V ☐ DELETE  
NAME HAGER, SCOTT  
STREET ADDRESS 218 34TH DR. EAST  
CITY-ST-ZIP BRADENTON FL 34208

2.1 TITLE Vice President ☒ Change ☐ Addition  
2.2 NAME Scott Hager  
2.3 STREET ADDRESS 6802 Heritage Lane  
2.4 CITY-ST-ZIP Bradenton, Fl. 34209

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-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.

SIGNATURE: MONA MATHENA *Mona Mathena President* 813-528-4282  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE #