
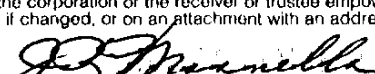


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Apr 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P94000081061 (1) 1. Corporation Name MIKE'S TYKES, INC.					
Principal Place of Business 13740 TOWN LOOP BLVD ORLANDO FL 32837			Mailing Address 13740 TOWN LOOP BLVD ORLANDO FL 32837		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/04/1994	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3279570	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Zip	7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent MANNELLA, JOSEPH R 7612 DEBEAUBIEN DRIVE ORLANDO FL 32835				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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
12. OFFICERS AND DIRECTORS					
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
	DP	MANNELLA, JUDITH	2457A S. HIAWASSEE RD., #309	1.1 TITLE	
		ORLANDO FL 32835		1.2 NAME	
				1.3 STREET ADDRESS	
				1.4 CITY - ST - ZIP	
	DVST	MANNELLA, JOSEPH R	2457A S. HIAWASSEE RD., #309	2.1 TITLE	
		ORLANDO FL 32835		2.2 NAME	
				2.3 STREET ADDRESS	
				2.4 CITY - ST - ZIP	
				3.1 TITLE	
				3.2 NAME	
				3.3 STREET ADDRESS	
				3.4 CITY - ST - ZIP	
				4.1 TITLE	
				4.2 NAME	
				4.3 STREET ADDRESS	
				4.4 CITY - ST - ZIP	
				5.1 TITLE	
				5.2 NAME	
				5.3 STREET ADDRESS	
				5.4 CITY - ST - ZIP	
				6.1 TITLE	
				6.2 NAME	
				6.3 STREET ADDRESS	
				6.4 CITY - ST - ZIP	
14. 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 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:  J.R. MANNELLA 4/14/98 407 857-2100					

CR2E034 (10/97)