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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 03 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500000944 (5)

MARGO E. THOMAS ENTERPRISES, INC.

749 GOLDEN SUNSHINE CIRCLE 749 GOLDEN SUNSHINE CIRCLE ORLANDO FL 32907 ORLANDO FL 32807-3469 3. Date Incorporated or Qualified 3a. Date of Last Report 01/04/1995 01/24/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3290846 21 26 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zio Zip Country 8. This corporation has liability for in angible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 LAUBACH, TIMOTHY C 7HOMAS 1218 MOUNT VERNON STREET 82 ORLANDO FL 83 64 WINTER 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 targing r with, and accept the obligations of, Section 607.0505, Florida Statutes. MARGO E. THOMAS SIGNATURE (NOTE Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS 13, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) **PSTD** ■ D€LETE TITLE 1.1 TITLE Change ___ Addition THOMAS, MARGO E THOMAS, MARGO E NAME 1.2 NAME 1707 SPRINGTIME LOOP 749 GOLDEN SUNSHINE CIRCLE 1.3 STREET ADDRESS STREET ADDRESS WINTER PARK, FL. 32792 ORLANDO FL 32807 CHY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 21 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIF 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition MAME 3.2 NAME STREET ADDRESS 3.3 STREET AODRESS 3.4. CITY-ST-ZIP CONSTRUCT DELETE THEF 4.1 TITLE ☐ Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change DRE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CHY-SY-ZIP 5.4 CITY-\$T-ZIP DELETE Change ___ Addition TITLE 61 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STEEL ADORESS 64 CITY-ST-ZIP 14. I do 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.