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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

DOCUMENT # P95000014185 (9)

CONSUMER CONCEPTS, INC.

Apr 25 1997 8:00am Sandra B. Mortham Secretary of State Secretary of State DIVISION OF CORPORATIONS

FILED

Principal Place of Business		Mailing Address		\$	\$8200 (1019 0100) 11001 (8600 01)) 1001
7035 STONE ROAD PORT RICHEY FL 34668		7035 STONE RD. PORT RICHEY FL 34668-4930			
				 Date Incorporated or Qualified 02/20/1995 	3a. Date of Last Report 03/12/1996
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 7035 Stone Road 26 7035 Ston		e Road	59-3299105	Not Applicable	
		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
1 <u>1</u>		27			Fee Required
	t Richey, FL	City & State Port Rich		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
L Zip	Country	Zip	Country	8. This corporation has liability for in	
24 346		29 34668 30	U.S.A.	Tioned claidle	Yes No
9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 11 Name					
ZAMPELLA, MICHAEL					
7035 STONE RD. PORT RICHEY FL 34668			82 Street Add	fress (P.O. Box Number is Not Acceptab	ole)
			83		
1			84 City		FL 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 ordigations of Section 607.0505, Florida Statutes. SIGNATURE Michael Zampella 4/17/97					
	Signature, typed or printed name units to age		legistered Agent signature requ		DATE
12.	ØFFICERS ANI	D DIRECTORS DELETE	13. 1.1 10 LE	ADDITIONS/CHANGES TO OFFIC	Change Addition
TITLE	D ZAMBELLA MICHAEL	□ otreit	1.1 THE 1.2 NAME		CT Outside CT Vigoriou
NAME	ZAMPELLA, MICHAEL 7035 STONE RD.				
STREET ADDRESS	PORT RICHEY FL 34668		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	D	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	ZAMPELLA, ADRIENNE	CJ beech	2.2 NAME		
STREET ADDRESS	7035 STONE RD.		2.3 STREET ADDRESS		
CITY-ST-ZIP	PORT RICHEY FL 34668		2. 4 CITY - ST - ZIP		ļ
TITLE	TORT MONET IE 04000	DELETE	3.1 TITLE		Change Addition
NAME		·	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		!	3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME		l	4. 2 NAME	•	
STREET ADDRESS		l	4.3 STREET ADDRESS		
CITY-ST-ZIP		l	4.4 CHY-ST-ZIP		
TITLE		DELETE	51 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	611IILE		Change Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

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.

64 CITY-ST-ZIP

4/17/97 (813) 848-0927