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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000030033 (1)

DONATO'S BIBLE AND BOOK STORE, INC.

Principal Place of Business Mailing Address
2599 SANFORD AVE 2599 SANFORD AVE
SANFORD FL 32773 SANFORD FL 32773-4606

FILED Apr 23 1997 8:00am Secretary of State



| SANFORD FL 32773 | SANFORD FL 32773-4606 | | | |
|---|---|--------------------------------------|---|------------------------------------|
| | | | 3. Date incorporated or Qualified 04/12/1995 | 3a. Date of Last Report 01/06/1997 |
| 2. Principal Place of Business | 2a. Mailing Address | | 4. FEI Number | Applied F |
| 21 | 26 | ······ | 59-3370943 | Not Appli |
| Suite, Apt. #, etc 22 | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Addition |
| City & State | City & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May B Added to Fees |
| Zip Country | Zip | Country | 8. This corporation has liability for | intangible tax under s. 199.0 |
| 24 25 | 29 | 30 | | Yes No |
| | f Current Registered Agent | | 10. Name and Address of New Re | gistered Agent |
| DONATO, ROSARIO | | 81 Name | • | |
| 2599 SANFORD AVE | | 82 Street | t Address (P.O. Box Number is Not Acceptal | ole) |
| SANFORD FL 32773 | | | | <u> </u> |
| | | 83 | | |
| | | 84 City | | 85 Zip Code |
| | | | | FL |
| office or registered agent, or both, in the agent. I am familiar with, and accept the agent. I am familiar with, and accept the agent. | he State of Fiorida. Such change was he obligations of, Section 607.0505, FI | authorized by the colorida Statutes. | d corporation submits this statement for the progration's board of directors. I hereby acce | pt the appointment as registed |
| | gistereo agentano title il applicable (NOT ERS AND DIRECTORS | E Registered Agent signatur 13. | | DAY. |
| TIPLE P | DELETE | 1.1 TITLE | ADDITIONS/CHANGES TO OFFI | CENS AND DIRECTORS IN 1. |
| NAME DONATO LYNOLAH | Colling | 1.2 NAME | Donata Lynda | 4 . |
| STREET ADDRESS 2588 SANFORD AVE. | DE STOR | 1.3 STREET ADDRESS | 35000 | Aue |
| CHTV-ST-ZIP SANFORD FL 32773 | E | 1.4 City-St-ZiP | 50 50 JULY 1010 | 2113 |
| TITLE V | DELETE | 2.1 TITLE | SUNTOW, PL 3 | Change A |
| NAME DONATO, ROSARIO | | 2.2 NAME | | E3 Charge E3 A |
| STREET ADDRESS 2588 SANFORD AVE. | | 2.3 STREET ADDRESS | | u 4 . |
| CITY-ST-ZIP SANFORD FL 32773 | | 2. 4 CiTY-ST-ZIP | | |
| TifLE | DELETE | 3.1 TITLE | | Change A |
| NAME | | 3.2 NAME | | <u> </u> |
| STREET ADDRESS | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZiP | | 3.4. CITY-ST-ZIP | | |
| TILLE | DELETE | 4.1 TITLE | | Change A |
| NAME | | 4. 2 NAME | | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | | |
| City-St-7-P | | 4.4 CITY-\$T-ZIP | | |
| mar | DELETE | 5.1 TITLE | | Change A |
| NAME | | 5.2 NAME | | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | | |
| CHTY - ST - ZiP | | 5.4 CITY-ST-ZIP | | |
| ŦTLF | ☐ DELETE | 61 TITLE | | Change A |
| NAME | | 6.2 NAME | | |
| STREET ADDRESS | | 63 STREET ADDRESS | | |
| CITY-ST-ZIF | | 64 CITY - ST - ZIP | <u> </u> | |

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 12 or Block 12 or na attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/9>

Daytime Phone # 0000727