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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Socretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P95000034260 (6)

EGAN ENTERPRISE, INC.

Principal Place of Business

Mailing Address



1904 19TH AVENUE WEST BRADENTON FL 34205		1904 19TH AVENUE WEST Bradenton FL 34205		_	· [· · · · · · · · · · · · · · · · · ·		
					3. Date Incorporated or Qualified 04/27/1995	3a. Date of L	ast Report
2. Principal Place of Bu	usiness	2a. Mailing Addread			4, FEI Number		Applied For
21 3208 Cambridge Dr.W.		26 3208 Cambridge DR.W			65.0576550		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$	8.75 Additional Fee Required
23 Bradenton Fl.		28 Bradenton Fl.		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip Country		29 34205 30 Manatu		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes 200			
24 34200	25 11 1ariate	29 34205	30 // //	anas.			
9, Na	ame and Address of Current	Hegistered Agent		1 Name	10. Name and Address of New I	registered Age	<u> </u>
STEIN, ALAN				2 Street A	ddress (P.O. Box Number is Not Acceptal	ole)	
1904 19TH AVENUE WEST				3 3 3 6	8 Cambridge L	IK. VV.	
BRADENTON FL 34205			٦	3	•		
				4 Bru	denton	FL ⁸	34205
or registered agent	ovisions of Sections 607.0502 a t, or both, in the State of Florida accept the ol <mark>dis</mark> ations of, Sectio	a. Such change was authorizi	ed by the co	e-named coi rporation's t	poration submits this statement for the publicand of directors. I hereby accept the app	rpose of changinointment as regi	ng its registered office stered agent. I am
SIGNATURE Signature 1	typed or printed name of registered agent as	nd little if applicable (NO	TE: Registered A	gent signature re	quired when reinstahng)	DATE	J.
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OF		
THE PS	SD	☐ DELĒTE	1. 1 7(7)	.E		□ c	hange 🗀 Addition
NAME EC	GAN, BETH		1.2 NAN	IE .	-and makeda	O DR. W.	
STREET ADDRESS 19	004 19TH AVENUE WEST		1.3 STR	EET ADDRESS	3208 Cambridge Bradiston Fl.		
CITY-ST-ZIP BF	RADENTON FL 34205		14 CITY	'-\$T-ZIP	Bradiston Fl. :		
TITLE		DELETE	2 1 TITI	.F		c	hange 🔲 Addition
NAME			2 2 NAN	IE			
STREET ADDRESS			23 STR	EFT ADDRESS			
CITY-ST-ZIP			2.4 CITY	'-S1-ZIP			
TITLE		☐ DELETE	3 1 T(1	.E			hange 🔲 Addition
NAME			3 2 NAM	r£			
STREET ADDRESS			3.3. STE	REET ADDRESS			
CHY-SI-ZIP			3.4.00	1-ST-Z1P			
TITLE		☐ DELETE	4 1 TIT	LE			hange 🔲 Addition
NAME			4 2 NA	1E			
STREET ADDRESS			4.3 STR	EET ADDRESS			
CITY-ST-ZIP			4.4 CIT	r-ST-ZIP			
TITLE		☐ DELETE	5. 1 TIT	LE			hange
NAME			5.2 NAM	ıε			
STREET ADDRESS			5 3 STF	EE1 ADDRESS			
CITY-S1-ZIP			5.4 CIT	Y-ST-ZIP			
TITLE		☐ DELETE	6 1 TIT				hange 🔲 Addition
NAME		_	6.2 NA	AE			
STREET ADORESS				EET ADDRESS			
CITY-SI-ZIP				Y-ST-ZIP			
14. I do hereby certify	that the information supplied w	rith this filing is voluntarily furr	nished and c	oes not qua	lify for the exemption stated in Section 11	9.07(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:

3-15-96 941-756-3352