

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000049585 (9)

1. Corporation Name

MUNKWITZ, BOUHAN ENTERPRIZES, INC.



Principal Place of Business

Mailing Address

740 PATRIDGE CT
MARCO ISLAND FL 33937

740 PATRIDGE CT
MARCO ISLAND FL 33937

2. Principal Place of Business

2a. Mailing Address

21 6900-29 Daniels Pkwy.
Suite, Apt. #, etc.

26 same
Suite, Apt. #, etc.

22 Ft. Myers, FL.
City & State

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City & State

23 33912
Zip

Country
LEE

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Zip

Country

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9. Name and Address of Current Registered Agent

BOUHAN, JOHN J
740 PATRIDGE CT
MARCO ISLAND FL 33937

3. Date Incorporated or Qualified

06/23/1995

3a. Date of Last Report

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81 Name GRANT + Tracy Munkwitz

82 Street Address (P.O. Box Number is Not Acceptable)
6900-29 Daniels Pkwy.

83 Ft. Myers, FL.

84 City

FL

85

Zip Code

33912

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

Tracy Munkwitz

(NOTE: Registered agent's signature required when re-stating)

7-15-96

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME BOUHAN, JOHN J
STREET ADDRESS 740 PATRIDGE CT
CITY-STATE-ZIP MARCO ISLAND FL 33937

TITLE D
NAME BOUHAN, JUNE M
STREET ADDRESS 740 PATRIDGE CT
CITY-STATE-ZIP MARCO ISLAND FL 33937

TITLE D
NAME MUNKWITZ, GRANT
STREET ADDRESS 3719 WINKLER AVE UNIT 1424
CITY-STATE-ZIP FT MYERS FL 33916

TITLE D
NAME MUNKWITZ, TRACY
STREET ADDRESS 3719 WINKLER AVE UNIT 1424
CITY-STATE-ZIP FT MYERS FL 33916

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Tracy Munkwitz

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-15-96 941-768-3445

Date: Day & Phone #

CR2E034 (3/96)