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

**PROFIT** 



FLORIDA DEPARTMENT OF STATE

ANN	UAL REPORT 1996	Secretar DIVISION OF C	B. Mortham ry of State CORPORATIONS		
DOCU 1. Corporation BU	IMENT # P950000 IRKE'S BUST	-A-BUG-, =	INC.		
Principal Place of Business  2454 ANDROS Lane  5 ame  Ft. Landerdale, Florida 33312-4744  2. Principal Place of Business  2a. Mailing Address				3. Date Incorporated or Qualified JULY 21, 1995 4. FEI Number	3a. Date of Last Report  Applied For
21		26		65-0609869	Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Stat	te	City & State	· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing	Fee Required  \$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip 29	Country 30	8. This corporation has liability for in Florida Statutes Yes	
	9. Name and Address of Current		81 Name	10. Name and Address of New Re	
100	PRAIT Hurley  Ten E Warten  The Ato  Tourney  To	th way		omas A. Burk ess (P.O. Box Number is Not Acceptable 4 ANDROS Lan	e   85   Zp Soos
11. Pursuant or registe familiar w SIGNATURE	to the provisions of Sections 607 0502 ared agent or both, in the State of Florida ith, and accept the obligations of Section Section Section Section 1997 (Section 1997).	n 697.0505, Florida Statutoe	ne corporation's board	d of directors. Thereby accept the appoi $\mathcal{H}$ –	ose of changing its registered office nument as registered agent. I am
12.	OFFICERS AND		Registered Agent signature recuired 13.	ADDITIONS/CHANGES TO OFFICE	DATE CERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chairman + Secre Judith P. Bur 2454 ANDROS CO Ft. Lauder dale, Fo	rke"	1. 1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 DITY-ST-ZIP		☐ Change ☐ Addition
TITLE		☐ DELETE	2 1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP			2.2 NAME 2.3 STREET ADDRESS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	2.4 CITY - ST - ZIP 3. 1 TITLE		Change Addition
TITLE			3.2 NAME 3.3. STREET ADDRESS		
		☐ DELETE			· Change / Addition
NAME		☐ DELETE	3 3. STREET ADDRESS 3 4 City - St - Zip		• Change Addition
NAME STREET ADDRESS		☐ DELETE	3.3. STREET ADDRESS 3.4 CITY - ST - ZIP 4. 1 TITLE	200001.00	
STREET ADDRESS CITY-ST-ZIP			3.3. STREET ADDRESS 3.4 CHY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CHY-ST-ZIP	20000180 -05/01/360101	
STREET ADDRESS City-St-Zip Title		☐ DELETE	33. STREET ADDRESS 34 CITY-ST-ZIP 4. 1 TITLE 42 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5. 1 TITLE	20000190 05/01/960101 ***200.00	
STREET ADDRESS CITY-ST-ZIP			33. STREET ADDRESS 34 CHY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CHY-ST-ZIP 5.1 TITLE 5.2 NAME	20000190 	
STREET ADD4ESS C+TY+ST+Z4P THUE NAME			33. STREET ADDRESS 34 CITY-ST-ZIP 4. 1 TITLE 42 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5. 1 TITLE	20000180 -05/01/960101 ***200.00	
STREET ADDRESS C-TY-ST-ZIP THLE NAME STREET ADDRESS			3.3. STREET ADDRESS 3.4. CHY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3. STREET ADDRESS 4.4. CHY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3. STREET ADDRESS	20000190 -05/01/960101 ***200.00	
STREET ADDRESS C-1Y-ST-ZiP Title NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ DELETE	3.3. STREET ADDRESS 3.4. CITY - ST - ZIP 4.1. TITLE 4.2. NAME 4.3. STREET ADDRESS 4.4. CITY - ST - ZIP 5.1. TITLE 5.2. NAME 5.3. STREET ADDRESS 5.4. CITY - ST - ZIP	20000190 -05/01/960101 ***200.00	Single Addition by Schange
STHEFT ADDRESS C-1Y-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE		☐ DELETE	3.3. STREET ADDRESS 3.4. CHY-ST-ZIP 4.1. TITLE 4.2. NAME 4.3. STREET ADDRESS 4.4. CHY-ST-ZIP 5.1. TITLE 5.2. NAME 5.3. STREET ADDRESS 5.4. CHY-ST-ZIP 6.1. TITLE	20000190 -05/01/960101 ***200.00	Single Addition by Schange

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Julith P. BurkeSIGNATURE and TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 23, 1996 954-587-7274