

**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 # P95000062977 (0)
1. Corporation Name

STEVE VARGA ENTERPRISES, INC.



Principal Place of Business

Mailing Address

1117 MANGO DRIVE
WEST PALM BEACH FL 33415

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WEST PALM BEACH FL 33415

3. Date Incorporated or Qualified 08/14/1995	3a. Date of Last Report
4. FEI Number 65-0605997	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 9359 Long Meadow Circle	26 9359 Long Meadow Circle
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23 Boynton Beach Fla	28 Boynton Beach Fla
Zip	Zip
24 33436	29 33436
Country	Country
25 U.S.	30 U.S.

9. Name and Address of Current Registered Agent

VARGA, FERENC S
1117 MANGO DRIVE
WEST PALM BEACH FL 33415

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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 obligations of Section 607.0505, Florida Statutes.

SIGNATURE *Ferenc S. Varga* (Date) **7-31-96**

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
	President	Varga, Ferenc S.		<input type="checkbox"/>
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP	Change	Addition
		9359 Long Meadow Circle	Boynton Beach Fl 33436	<input type="checkbox"/>	<input type="checkbox"/>
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY - ST - ZIP	Change	Addition
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY - ST - ZIP	Change	Addition
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY - ST - ZIP	Change	Addition
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY - ST - ZIP	Change	Addition
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY - ST - ZIP	Change	Addition

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 1119.07(3)(k), Florida Statutes. I further certify that the information included 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: *Ferenc S. Varga* (Date) **7-31-96 (561) 734-2649**

CR2E034 (3/96)