

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

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000069985 (6)

1. Corporation Name

SNAPPER ENTERPRISES, INC.



Principal Place of Business

Mailing Address

**580 W. 40 PLACE
HIALEAH FL 33012**

**580 W. 40 PLACE
HIALEAH FL 33012**

2. Principal Place of Business

21 **7577 N.W. 50 ST**

2a. Mailing Address

26 **P.O. BOX 111537**

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

MIAMI FL

28 City & State

HIALEAH FL

24 Zip **33166**

25 Country

29 Zip **33011**

30 Country

g. Name and Address of Current Registered Agent

**NUNEZ, DANIEL A JR.
580 W. 40 PLACE
HIALEAH FL 33012**

3. Date Incorporated or Qualified

09/11/1995

3a. Date of Last Report

4. FEI Number

65-0607184

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

1 Name

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

4 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

Signature, typed or printed name of registered agent and the applicable date

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.

12. OFFICERS AND DIRECTORS

TITLE	DPVS	<input type="checkbox"/> DELETE
NAME	NUNEZ, DANIEL A JR	
STREET ADDRESS	580 W. 40 PLACE	
CITY - ST - ZIP	HIALEAH FL 33012	
TITLE	T	<input type="checkbox"/> DELETE
NAME	NUNEZ, DANIEL A JR	
STREET ADDRESS	580 W. 40 PLACE	
CITY - ST - ZIP	HIALEAH FL 33012	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
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CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12		
13	STREET ADDRESS	
14	ST - ZIP	
21		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22		
23	STREET ADDRESS	
24	ST - ZIP	
31		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32		
33	STREET ADDRESS	
34	ST - ZIP	
41		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42		
43	STREET ADDRESS	
44	ST - ZIP	
51		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52		
53	STREET ADDRESS	
54	ST - ZIP	
61		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62		
63	STREET ADDRESS	
64	ST - ZIP	

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: *Daniel A. Nunez Jr.* **DANIEL A. NUNEZ JR.** 4/16/96 (305) 591-3331
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DAYTIME PHONE #

CR2E034 (12/95)