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

CORPORATION ANNUAL REPORT



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

1996

P95000071311 (1) DOCUMENT #
1. Corporation Name

MANTA DAY CRAFTS INC

MMM	J.A.	NAT.	UNAF	10,	IIIO

Principal Place of Business

Mailing Address



850 NE THIRD ST., STE. 101 DANIA FL 33004		850 NE THIRD ST., S Dania Fl 33004	850 NE THIRD ST., STE. 101 Dania Fl 33004			
					3. Date Incorporated or Qualified 09/15/1995	3a. Date of Last Report
2. Principal Pla	ce of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65 061 6239	Not Applicable
Suite, Apt. #	, etc.	Suite, Apt #, etc.	·····		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		Oty & State			Election Campaign Financing Trust Fund Contribution	S \$5.00 May Be Added to Fees
Zip 24	Country 25	<i>Ζ</i> φ	Country 30		8. This corporation has liability for in Florida Statutes ☐ Yes	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Re	agistered Agent
			81	Name		
NORBERG, GARD E 101 SE THIRD AVE., APT. 505 DANIA FL 33004			82	Street Add	lress (P.O. Box Number is Not Acceptabl	e)
			83			
			64	City		FL 85 Zip Code
or registere	o the provisions of Sections 607.0502 ed agent, or both, in the State of Floric n, and accept the obligations of, Secti	da. Such change was authoriz	ed by the corp	named corpo poration's boa	oration submits this statement for the purp and of directors. Thereby accept the appo	ointment as registered agent. I am
SIGNATURE _	Signature, typys or project reached registered ages	and the train 1984. (140)	Oth Evojestered Age	nt signature re pare	ed when recolating:	4-11-96
12.	OFFICERS ANI	DIRECTURS	13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1 1 TITLE		\mathcal{D}/\mathcal{D}	☑ Change ☑ Addit on
NAME	Norberg, per Daniel		1.2 NAME	N	ORBERG, PER DANIE	L
STREET ADDRESS	850 NE THIRD ST., STE. 10	11	1 3 STRE€	ADDRESS 17	725 N 16TH AV. \$203	
CITY-ST-ZiP	DANIA FL 33004		1.4 CHY-	SI-21P H	011YW00D,FL 3302	
TITLE	D	DELETE	2 1 TITLE		ID	☐ Change 🌠 Addition
NAME	norberg, gard e		2.2 NAME	N	orberg, gard e	
STREET ADDRESS	101 SE THIRD AVE., APT. 505				I SE THIRD AVE. APT.	5 05
CITY-ST-ZIP	DANIA FL 33004		2.4 CHY-	ST-ZIF \mathcal{D}_{I}	ANIA FL 33004	
TITLE		☐ DELETE	3 1 TITLE		/D	☐ Change 🌠 Addition
NAME			3.2 NAME	N	ORBERG, M, ERIK	
STREET ADDRESS			33 STREE	LADORESS 17	725 N 16TH AV. *109_	
CITY - ST - ZIP			3.4 CiTY - 2	ST-ZIP H	OLLYWOOD, FL 33020)
TITLE		☐ DELETE	4 1 TifLE	Υ	and a sulf	Change Maddition
NAME			. 42 NAME	N	ORBERG, L PING	
STREET ADDRESS			43 STREE	TADDRESS 77	725 N 16 TH AV \$ 203	
CITY - ST - ZIP			4.4 CITY - 1	S'-ZIP //	01LYWOOD, FL 33020)
₹ITL€		□ DELETE	5 : TITLE	S		☐ Change
NAME			5.2 NAME	N	IORBERG, LINGKAL	
STREET ADDRESS			5.3 STREE	ADDRESS / 7	725 N 16TH AV. X109 OLLYWOOD, FL330	_
CITY-ST-ZIP			5.4 CHTY -	ST-ZIP 🖟	OLLYWOOD, FL 33'0	
TITLE	 · · · · -	☐ DELETE	6 1 TITLE			Change Addit on
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	I ADDRESS		ļ
CITY-ST-ZIP			6 4 CITY -			
14, I do hereby	certify that the information supplied	with this filing is voluntarily furn	nished and doe	es not qualify	for the exemption stated in Section 119.	07(3)(k), Florida Statutes. I further

red 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: Ping L Norberg PING L NORBERG 4.2.96 (954) 929 0066

CR2E034 (12/95)