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Feb 03 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000075170 (7)

1. Corporation Name
FRIENDLY FREDDY OF PINELLAS PARK, INC.

Principal Place of Business

5801 62ND AVE. N.
PINELLAS PARK FL

Mailing Address

6265 SUN BLVD., 211G
ST. PETERSBURG FL 33715-3316

3. Date Incorporated or Qualified
09/25/1995

3a. Date of Last Report
07/09/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 5801 62ND AVE N.

27 Suite, Apt. #, etc.

28 City & State

29 PINELLAS PARK, FL.

30 Zip

31 Country

32 33781

33 U.S.A.

4. FEI Number
59-3338198

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

9. Name and Address of Current Registered Agent

AWAD, TONY S
6265 SUN BLVD., STE. 211G
ST. PETERSBURG FL 33715

10. Name and Address of New Registered Agent

81 Name AWAD, TONY S.
82 Street Address (P.O. Box Number is Not Acceptable)
2043 DIAMOND CT
83
84 City OLDSMAR, FL 85 Zip Code 34677

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 title, if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	AWAD, ABDEL-MESSEEH S	
STREET ADDRESS	1791 SUNWOOD BLVD.	
CITY-ST-ZIP	LONGWOOD FL 32779	
TITLE	D	DELETE
NAME	AWAD, TONY S	
STREET ADDRESS	6265 SUN BLVD., 211G	
CITY-ST-ZIP	ST. PETERSBURG FL 33715	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	Change Addition
2.2 NAME	AWAD, TONY S.
2.3 STREET ADDRESS	2043 DIAMOND CT.
2.4 CITY-ST-ZIP	OLDSMAR, FL. 34677
3.1 TITLE	Change Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	Change Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	Change Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	Change Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
AWAD, TONY S.

1/27/97 (813) 541-1694

CR2E034 (9/96)