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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000084884 (2)

FILED May 14 1997 8:00am Secretary of State

A FUNFEST EVENT, INC. Principal Place of Business Mailing Address 1113 \$ 30 AVENUE HOLLYWOOD FL 33020 HOLLYWOOD FL 33020-5629								
					3. Date incorporated or Qualified 11/02/1995		e of Last 6/1996	•
2. Principal f	Place of Business	2a. Mailing Address	······································		4. FEI Number	1 7715		Applied For
1		26			65-0619702			Not Applicable
Suite, Apt	f #, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired			5 Additional Required
City & Sta	ite	City & State			6. Election Campaign Financing Trust Fund Contribution			May Be
Ζφ 2φ	Country 25	Zip 29	Count	ry	8. This corporation has liability for	intangible :	tax unde	
<u></u>	9, Name and Address of Cur		1301		10. Name and Address of New Re			
STI	REETER, JANET		8	1 Name				
1113 S 30 AVENUE HOLLYWOOD FL 33020			82		dress (P.O. Box Number is Not Acceptat	ole)	······································	· · · · · · · · · · · · · · · · · · ·
			8	3			·	
			8	4 City		FL	85 Zi	p Code
		bligations of, Section 607.0505, F	Florida Statut	es.	ation's board of directors. I hereby acce			
SIGNATURE	Signal we appeal or printed name of registerer OFFICERIS	o agent and offe if applicable (NC AND DIRECTORS	OTE: Registered A	oper evularigis inegu	ured when reinstalling) ADDITIONS/CHANGES TO OFFIC	DATE	DIRECT	ORS IN 12
SIGNATURE 12. THE NAME	Signal we typed or punted name of registers OFFICERS PSTD STREETER, JANET	o agent and title if applicable (NC	OTE: Rogislered A 13. 1.1 TITLE	open signature requ	uired when reinstaling)	DATE		ORS IN 12
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4. 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 direction 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 PRINT

4/26/97

Daytime Prione # 0126233