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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000014008 (2)

SPANKY'S ENTERPRISES, INC.

Principal Place of Business Mailing Address P.O. BOX 1507 P.O. BOX 1507 LARGO FL 33779-1507 LARGO FL 34639-1507 3. Date Incorporated or Qualified 3a. Date of Last Report 02/14/1996 4. FEI Number 65-0640788 2. Principal Place of Business 2a. Mailing Address Applied For 577<u>5</u> 5775 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City. & State 6. Election Campaign Financing \$5.00 May Be Peters buc 28 Trust Fund Contribution 23 Added to Fees County This corporation has liability for intangible tax under s. 199.032, Pinellas Yes No Florida Statutes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 SPANGLER, MICHAEL 5435 - 60TH WAY, NORTH ST. PETERSBURG FL 34639-1507 83 84 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. Thereby accept the appointment as registered agent. Lam familiar with and accept the obligation of, Spotion 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12 13. DELETE Change Addition TITLE D 1.1 TITLE 16 Spansler, Michael NAMÉ SPANGLER, MICHAEL 1.2 NAME 6775 61st St. N 5435 - 60TH WAY, NORTH 1.3 STREET ADDRESS STREET ADDRESS ST. PETERSBURG FL 33709 1.4 CITY - ST - ZIP CITY-SI Addition DELETE Change 2.1 TITLE HILE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZiP Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE THILE 4. 2 NAME NAMS 4.3 STREET ADDRESS STREET ADDRESS

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.

6.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

53 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME

6 1 TITLE

6.2 NAME

SIGNATURE:

CITY - ST - ZIP

STREET ADDRESS CITY: \$1-205

STREET ADDRESS

THUE

NAME

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

DELETE

U7/87
Date Daviero Phone #

Change

Change

Addition

Addition

FILED

May 08 1997 8:00am

Secretary of State