

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED

Jul 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000023319 (2)**

1. Corporation Name
F & L INVESTMENTS, INC.

Principal Place of Business
**711 W. HILDA
TAMPA FL 33603**

Mailing Address
**711 W. HILDA
TAMPA FL 33603**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 711 W. Hilda Suite, Apt. #, etc. 22 City & State 23 Tampa, FL 33603 Zip 24 33603		2a. Mailing Address 26 Same Suite, Apt. #, etc. 27 City & State 28 Zip 29 Hillsb. Country 30		3. Date Incorporated or Qualified 03/14/1996		3a. Date of Last Report	
4. FEI Number 59-3366888		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No							
9. Name and Address of Current Registered Agent GARCIA, FRANK L 711 W. HILDA TAMPA FL 33603				10. Name and Address of New Registered Agent			
81 Name Frank J. Garcia				82 Street Address (P.O. Box Number is Not Acceptable) 711 W. Hilda			
83				84 City Tampa FL 85 Zip Code 33603			

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GARCIA, FRANK L	1.2 NAME	Frances Jackson
STREET ADDRESS	711 W. HILDA	1.3 STREET ADDRESS	711 W. Hilda
CITY-ST-ZIP	TAMPA FL 33603	1.4 CITY-ST-ZIP	Tampa, FL 33603
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	Vice President
STREET ADDRESS		2.3 STREET ADDRESS	Frank J. Garcia
CITY-ST-ZIP		2.4 CITY-ST-ZIP	711 W. Hilda, Tampa, FL 33603
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	Secretary
STREET ADDRESS		3.3 STREET ADDRESS	Anita Pinella
CITY-ST-ZIP		3.4 CITY-ST-ZIP	711 W. Hilda
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	Treasurer
STREET ADDRESS		4.3 STREET ADDRESS	Dania Valenti
CITY-ST-ZIP		4.4 CITY-ST-ZIP	711 W. Hilda, Tampa, FL 33603
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: *Dania Valenti* 7/21/97 231-0921

CR2E034 (4/97)