FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 07 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000024897 (6)

F.N.N.,	INC.			, ,							
Principal Place of Business 1236 NE 7TH AVE FT LAUDERDALE FL 33304 Mailing Address 1236 NE 7TH AVE FT LAUDERDALE FL 33304								1 (BB/18B) (12 184/8 MH) SB/4 MB/11 SB/11	 		1 1 4 14 16 1 7
								3. Date Incorporated or Qualified 03/14/1996	3a. Date	e of Last R	leport
2. Principal P	lace of Busin	ness	2a. Mail	2a. Mailing Address				4. FEI Number	<u></u>	Ar	oplied For
21			26	26				65-0651571		No	ot Applicable
Suite, Apt	#, etc		Suite 27	- I - I - I - I - I - I - I - I - I - I				5. Certificate of Status Desired		- · ·	Additional equired
City & Stat	ie		City	City & State				6. Election Campaign Financing		\$5.00	May Be
23			28	······································			Trust Fund Contribution	<u> </u>	Added 1	to Fees	
Zip	Country		Zip	<u>├</u>		intry	,	8. This corporation has liability for intangible tax under s. 199.032,			
24	0 Name	25	29 Current Registered					Florida Statutes Yes No 10. Name and Address of New Registered Agent			
<u></u>	LUDA, FRE		Content Hegistored	- About		81	Name	ID. Halling and Address of Hear Fre	Jierolan vi	Jenn.	
175	1 NW 45Th	1 ST				82	Street A	Address (P.O. Box Number is Not Acceptable)			
OAF	KLAND PAF	RK FL 33309				83					
						00					
						84	City		FL		Code
office or r agent. I a	reg stered ag im familiar w	gent, or both, in the ith, and accept the	e State of Florida. Si e obligations of, Sec	uch change was stion 607.0505, F	authorized Iorida Stat	d by lutes	the corpo	orporation submits this statement for the p oration's board of directors. I hereby accep	it the appoi	intment as	registered
	Signature types		vered agent and tille if appli			d Age	nt signature re	equired when reinstating)	DATE		
12.	OFFICERS AND DIRECTORS DELETE			13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFIC		Change	Addition		
TITLE NAME					1.2 NAME			FRED COLLIDA	ı.	triange	Addition
STREET ADDRESS							ADDRESS	1236 NE TEL AVE			
CITY-ST-ZIP				1.4 C)			M. LANDERDALL DL	337	.		
TITLE				DELETE	2.1 Til	_	1-20	PRAS		Change	Addition
NAME					2.2 NAME				_		
STREET ADDRESS						2.3 STREET ADDRESS		MICOLE BURNS 1276 NE 774 AVE			
CITY-ST-ZIP							ST-ZIP	FR LAUDENBALL R	. 373	oy	
TITLE				DELETE	3.1 71	TLE				Change	Addition
NAME					3.2 NA	AME					
STREET ADDRESS					3.3 ST	REET	ADDRESS				
CITY-ST-ZIP					3.4. C	TY-5	ST-ZIP				
TOTLE				☐ DELETE	4.1 Til	TLE			Į	Change	Addition
NAME					4. 2 N	AME					
STREET ADDRESS					4.3 ST	REET	ADDRESS				
CITY-ST-ZIP				DC+ EXC	4.4 CI		T-ZIP			Change	Addition
TITLE				DELETE	5.1 Til				ι	Change	MUUIHOIT L
NAME					5.2 NA		*DDDCCC				
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP				DELETE	5.4 CI 6.1 TO		I-ZIP		T	Change	Addition
TITLE				- bereit							FOURION
NAME CIRCLI ADOBLES					6.2 N/		ADDRESS				
STREET ADORESS				-		INEE!					

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 of the receiver or nustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

FRED COLLIAN