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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000029992 (0)

MINE'S & MORE, INC.

**FILED** May 02 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 250 SW 5TH COURT STE 3 250 SW 5TH COURT STE 3 POMPANO BEACH FL 33080 POMPANO BEACH FL 33080-7912								
					3. Date Incorporated or Qualified 04/05/1996	3a. D	ate of Last R	eport
2. Principal Place of Business  ABOVE 26  2a. Mailing Address  2b. ABOVE 26					4. FEI Number 657153		<u> </u>	plied For
Suite, Apt. #, etc.	150 TOUVE	26   Suite, Apt. #, etc.   27   City & State					\$8.75 Additional Fee Required \$5.00 May Be	
City & State								
1	Couples	28	Cour	otes.	Trust Fund Contribution		Added	o Fees
_ <b>Ζ</b> ιρ  }	Country 25	Zip	30	шу	This corporation has liability for Florida Statutes	or intangible Yes		199.032,
	me and Address of Current		11		10. Name and Address of New !	Registered	Agent	
DONALD R.	WALTERS PA			81 Name				
2189 SE 9TH STREET POMPANO BEACH FL 33062					dress (P.O. Box Number is Not Accept	able)		
				83				
			t	84 City		FL	85 Zip (	Code
PGNATURE Signature. (	sect or profed name of registered age:	nt and title if applicable (N	IOTE. Registered		ation's board of directors. I hereby acc	DATE		
2. III PSD	OFFICERS AND	DELETE	13.	· T	ADDITIONS/CHANGES TO OF	FICEHS AN	Change	S IN 12  Addition
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AME			6.2 NA	1				
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I / SI- ZIP	that the information supplied	Lwith this filing does not gu		Y-ST-ZIP	ed in Section 119.07(3)(i), Florida Statu	itee I furthe	or cartify that	the

The messay centry that the mornialism supplied with this imiting does not quality for the exemption stated in Section 119.07(3)()). Florida Statutes. I florither 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 legat 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 3 if chapted, or on an attachment with an address.

SIGNATURE: