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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000039767 (4)

FILED Apr 15 1998 8:00am Secretary of State

FRANT	ONY INC.	` ,					1014 5841 5441
Principal Plac	ce of Business	Mailing Address		·	4 10016001110 10110 01111 00111 00111 00111	IN TRUTH BUILT IN GEN UN	
	ih avenue (A1A) Beach Fl 33441	665 S.E. 20TH AVENUE (A1A) DEERFIELD BEACH FL 33441		DO NOT WRITE IN T	HIS SPACE		
					3. Date Incorporated or Qualified		
					05/03/1996		
2. Principal F	. Principal Place of Business 2a. Mailing Address				4. FEI Number	- I Ar	oplied For
21	26				65-0672278		ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			·			\$8.75	Additional
27					5. Certificate of Status Desired		equired
City & State City & State					6. Election Campaign Financing	\$5.00	May Be
23	28		~-···	Trust Fund Contribution		to Fees	
Zip	Country	Ζιp	Count	ry	8. This corporation owes or has paid the		tangible
24	25	29	30		Personal Property Tax due June 30.		No
	9. Name and Address of Curre	ent Registered Agent		- T A)	10. Name and Address of New Registe	red Agent	
	IOINA, FRANCIS		8	1 Name			
665 S.E. 20TH AVENUE (A1A)			8:	82 Street Address (P.O. Box Number is Not Acceptable)			
DE	ERFIELD BEACH FL 33441				<u>,</u>		
			8:	3			
			84	4 City		85 Zip (Code
					poration submits this statement for the purpor		
office or agent. 1 a					tion's board of directors. I hereby accept the		registered
	Signature, typed or printed name of registered ag			gent signature requ	ired when reinstating) DA		
12.	PST OFFICERS AF	ND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS	Change	Addition
NAME	TROINA, FRANCIS P	F-7 DETECT	1.1 TITLE	i		C) thange	L. Addition
	665 SE 20TH AVE (A1A)		1.2 NAME				
STREET ADDRESS	BEEDELE D DOLL EL			T ADDRESS			
CITY-\$T-ZIP TITLE	DEERFIELD BOTH FL	DELETE	1.4 CITY - 2.1 TITLE			Change	Addition
NAME		בין טוננונ	2.1 HILE			the cuantic	[] Madicipit
STREET ADDRESS		•	- 2	T ADDRESS	- in		
CITY-ST-ZIP					••		
TITLE	-	☐ DELETE	2. 4 CITY 3.1 TITLE			Change	Addition
NAME			3.2 NAME			Unungo	
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP	}		3.4. CITY				
TITLE		DELETE	4.1 TITLE			Change	Addition
NAME		<u> </u>	4. 2 NAM				
STREET ADDRESS			1	T ADDRESS			
CITY-ST-ZIP			4.4 CiTY-				
TITLE		DELETE	5.1 TITLE	U1 - E11		Change	Addition
NAME	}		5.2 NAME	}			
STREET ADDRESS	İ			T ADDRESS			ĺ
CITY-ST-ZIP			5.4 CITY-				
TITLE		☐ DELETÉ	6.1 TITLE			Change	Addition
NAME			6.2 NAME	1			
STREET ADDRESS			I.	T ADDRESS			
CITY-ST-ZIP			6.4 CITY-				
	Legity that the information supplied a	with this filling does not qualify to			Section 119 07/3)(i) Florida Statutes Lifurths	r cartify that the	information

14. I 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 enanged, or on an attachment with an address.

ONATURE DE DE TONIO DE TONIO POR PORUNDA 2500