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 # P96000047754 (2)

1. Corporation Name FRONC - CAR CORPORATION Principal Place of Business 2968 JODI LANE PALM HARBOR FL 34684 Address PALM HARBOR FL 34684			1646	
				3. Date Incorporated or Qualified 3a. Date of Last Report 05/31/1996
2. Principal Place of Business		2a. Malling Address		4. FEI Number LApplied For
Suite Apt. #, etc		Suite, Apt. #, etc.		59 - 3383769 Not Applicable \$8,75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & Stat	0	City & State		6. Election Campaign Financing \$5.00 May Be
23		28	1 0 1	Trust Fund Contribution Added to Fees
Ζιρ 24	Country 25	Zip 29	Gountry 30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes \(\begin{align*}\begin{align*}X\ Yes \(\begin{align*}\begin{align*}X\ Y\
24	9. Name and Address of Curre			10. Name and Address of New Registered Agent
	BOLOTNY, STEVE		81 Nam	е
	0 49TH STREET NORTH, STE. 4	106-5	82 Stree	et Address (P.O. Box Number is Not Acceptable)
PIN	ELLAS PARK FL 34666		83	
			84 City	FL 85 Zip Code
11. Pursuant office or agent. Fa	to the provisions of Sections 697,050 registered agent, or both, in the Statum familiar with, and accept the oblig	02 and 607.1508, Florida Statul e of Florida. Such change was pations of, Section 607.0505, Fl	tes, the above-name authorized by the co orida Statutes.	ed corporation submits this statement for the purpose of changing its registered proporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered ag	ent and little if applicable (NOT	E: Registered Agent signate	ure regulated when reinstaling) DATE
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE P	KRZYSZTOF FRA	CKIELICZ DELETE	1.4 TITLE	Change Addition
NAME	2968 JODI LANI	E	1.2 NAME	
STREET ADDRESS CITY-SE-7/P	PALM MARBOR	FL.31684 -1646	1.3 STREET ADDRESS 1.4 City-St-Zip	
TITLE		DELETE	21 TITLE	☐ Change ☐ Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	s ; ;;
CITY ST-ZIF		DELETE	2. 4 CITY - ST - ZIP	Change Addition
NAME.		ר"ו הנונונ	3.1 TITLE 3.2 NAME	C. Grande C. Augusti
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	S
CITY ST-ZIP		DELETE	4.4 City-ST-ZIP	Change Addition
NAME		[] ULLEIE	5.1 TITLE 5.2 NAME	La change La Addition
STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS	s
CITY - ST - ZIP			54 CITY-ST-ZIP	
TITLE		DELETE	61 TITLE	Change Addition
NAME			62 NAME	
STREET ADDRESS			6.3 STREET ADDRES	s
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 to Chapter 607 on an attachment with an address.

SIGNATURE:

IATURE AND TYPED OR PRINTED NAME OF SIGNING GOMES OR DIRECTOR

04/28/97

Daytime Phone #

FILED

May 13 1997 8:00am

Secretary of State